



SERVICES CARD HOME CARE

Document code:

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REV. 0

OF 04/18/2023

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Service card for home care



Year 2023



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Dear User ,

the "Service card" is a document that governs the relationship between the bodies or structures that offer services to citizens and the user who uses them, aimed at protecting the rights of users with direct control over the quality of the services provided.

With this specific Service card for Home Care services, supplementary to the institution's Service Card which describes all the services provided by the Consortium, we would like to promote your welcome and active participation in the assistance process, in order to further improve the activities offered .

Con.So.Sar. believes in the centrality of the person and concretely undertakes:

- Information, publicity and transparency
 - Explain what services the institution can offer to citizens publicly and/or privately
- Give simple and fast information on the services provided
- Constant improvement of the services offered
- Improving the relationship between user and service provider

The service card is made available to anyone who wants to view it in order to be able to compare their experience of the service with what is stated in it.

In summary, the proposed objective is to inform the citizen and the competent institutions on the operating modality pursued by the writing body.



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1. Who we are

The Consorzio Stabile Socio Sanitario Aretuseo, - Società Cooperativa Sociale (abbreviated Con.So.Sar.) Established in Syracuse in 2013, with a regular notarial deed dated 25 July 2013 (Repertory No. 118127; Collection No. 28286), as follows amended by notarial deed dated 04/03/2022 registered under no. 8564 on 11/03/2022) was set up with the intention of creating a network of subjects with *many years* of work experience in the third sector both in agreements/accreditations with public bodies and privately, who could operate together inside and outside the territory of membership.

It directs its attention to all sections of the citizens concerned, but in particular to the weakest and most disadvantaged sections of society such as the elderly, persons with disabilities and minors.

In order to achieve its goal, the consortium has carefully chosen the companies to be consortium in the Syracuse area, giving priority to the possession of the requisites of important technical-organizational skills, multi-twenty-year experience in the social-health-care sector and that the same cooperatives comply with all the standards regarding work, safety and are in possession of the ISO 9001 quality certificate concerning cooperatives.

To date, the registered office of the Con.So.Sar. it is in Syracuse via San Methodio, 26; and has its operational headquarters in Syracuse (SR) in via Carlo Forlanini 3/E, Syracuse.

The telephone number is 0931 093263



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The "Consorzio Socio Sanitario Aretuseo" is active in the Sicilian Region – Province of Syracuse and offers itself as a specialized partner to Healthcare Companies, Municipalities and Provinces that intend to activate home care services.

- Registration in the register of the Sicilian region art. 26 of Regional Law 22/86 for the following types of Services:

Registration in the Regional Register n. 3943 of 11/06/2014 for home assistance for the elderly

Registration in the Regional Register n. 3944 of 11/06/2014 for home assistance for the disabled

Registration in the Regional Register at no. 3945 dated 11/06/2014 for home care for minors

It offers services under an agreement with local institutions, pursuing exclusively social solidarity purposes, in the field of social and educational assistance in favor of fragile categories of the population such as: minors, persons with disabilities and the elderly, so that these people are guaranteed the inalienable right to a free and protected life, as independent as possible in respect of one's dignity.

In the management of the services, it can act in its own name, providing the services directly, on behalf and in the interest of the associated cooperatives, or in ATS/ATI with other third party bodies of the territory in order to improve and expand the management of services to other territorial realities and expand the network of collaborations.

Corporate data	
Registered office	Via San Methodio, 26 96100, Syracuse
Operational Headquarters	Via C. Forlanini 3/E, 96100 Syracuse
Tel	0931 35154
Operational hours	From Monday to Sunday from 08.00 to 20.00
E-mail	consosar@gmail.com
Certified mail	consosar@pec.it



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Website	<i>www.consosar.it</i>
Registration with the Chamber of Commerce	<i>Of 30/07/2013 Chamber of Commerce of Syracuse, ordinary section</i>
REA	<i>SR-149211</i>
Registration in the register of cooperative companies	<i>C102210 of 06/19/2014</i>
VAT number and Tax Code	<i>01799990898</i>
	<i>BoD composition</i>
President	<i>Dr. Alessandro Di Prisco</i>
Vice president	<i>Dr. Antonino Di Prisco</i>
Counselor	<i>Dr. Salamone Massimiliano</i>
Counselor	<i>Dr. Benedetto Manuela</i>
Counselor	<i>Dr. Biondo Viviana</i>

This Services Card intends to illustrate the methods of taking charge for the management of home care: type, potential delivery of home care, methods of access and provision of services, management of any emergencies, times, contacts.

2. The general principles

Con.So.SAR recognizes some fundamental principles

EQUALITY Services must be provided according to rules that are the same for everyone, without any kind of preference or discrimination. Equality must also be guaranteed by respect for individual differences. Therefore, the services must be designed individually and

IMPARTIALITY The behavior of operators towards users must be based on impartiality and justice. All users must be guaranteed respect for privacy and personal dignity;

PARTICIPATION Each user must have the right to contribute to the improvement of the quality of services through reports and complaints. Con.So.Sar undertakes to improve its services, taking into account the feedback received from users, and to do what is necessary to satisfy requests;



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CENTRALITY OF THE PERSON Each user must be guaranteed the right to freedom of choice of treatment methods and information about the services provided and the rules of access to services;

CONTINUITY The services must be provided with continuity and regularity, ensuring, in the event of interruptions or irregular operations, appropriate measures to avoid or limit inconvenience;

RIGHT TO CHOICE Operators must guarantee, within the limits of organizational and functional requirements, maximum flexibility with respect to users' choice regarding the services provided; **RESPECT OF PRIVACY** In implementation of the provisions in force, the services must respect the privacy and confidentiality of users and operators;

EFFICIENCY AND EFFECTIVENESS Services must be provided using resources efficiently and effectively

3. Service activation

The activation of the assistance service (as shown in Table 1) occurs through one of the following methods:



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► The General Practitioner or Pediatrician of Free Choice or a doctor of the National

Health System (SSN) issues the assisted person (or a family member) the request for activation of Home Assistance, specifying the assistance need;

► Through protected discharge, requested by the hospital where the patient is

hospitalised. The request is sent to the District which carries out an evaluation of the case to define an Individual Assistance Plan (PAI). The District, in agreement with the General Practitioner or the Pediatrician of Free Choice, defines the PAI by sharing it with the patient and/or his/her family members or caregivers.

The PAI indicates the assistance objectives, the duration, the modality of disbursement of the care and the professionals involved (nurses, physiotherapists, etc.). Once the PAI has been received, ConSoSar organizes patient care at home with its professionals, guaranteeing continuity of care.

The services offered have specific characteristics:

► home assistance requires at least one person who lives with and/or takes care of the

patient and who collaborates with the service. This means, for example, facilitating the access of healthcare professionals to one's home on the day scheduled for assistance or informing the Operations Center in the event of the impossibility of welcoming the operator for the execution of the scheduled assistance;



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► home assistance operates according to a programming of interventions responding to

needs related to chronic conditions and disabilities

Table 1: ACTIVATION PHASES and RELEASE FROM SERVICE

PHASE	ACTIVITY'	COMPETENCE	RECIPIENT
Report	Formal/informal communication	Hospital doctors, family members	General Practitioners - Free Choice Paediatricians
Preliminary assessment	Anamnesis	General Practitioners and Paediatricians of Free Choice	Assisted
ADI activation request	Sending the formal activation request	General Practitioners and Paediatricians of Free Choice, hospital doctors	Competent Health and Social District
Multidimensional assessment	Assessment of the patient's condition from a clinical and socio-environmental point of view	Competent Health and Social District	Assisted and family
Preparation of Individualized Care Plan (PAI)	Identification of actions, actors and specific responsibilities	Competent Health and Social District	Assisted and family
ADI activation	Sending of the	Competent Health and	ConSoSar



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	documentation relating to the activation of the ADI	Social District	
Implementation of the PAI	Provision of the services envisaged by the PAI	ConSoSar	Assisted and family
Care path monitoring	Through assessment of the care pathway and the patient's state of health and periodic re-evaluation of the PAI	ConSoSar and all the actors involved in the PAI (SS District, GPs/PLS, hospital facilities, others, each for their own competences in accordance with the PAI	Assisted and family
Resignation or Cessation of Care	Achievement of the objectives set in the PAI	Technical director of Con.So.Sar.	Client body

4. Our role in service

ConSoSar deals with:

► implement the care plan by organizing and carrying out all the activities

► services at home for clients with dedicated professionals, nurses, rehabilitation

professionals, doctors, etc.;



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► build a relationship of trust with the patient and his family through careful listening to

needs and a quick and concrete response thanks to the flexibility of the organization;

► ensure coordination and constant verification of the service provided;

► collaborate with all subjects involved in assistance (PHA, family doctors, hospitals,

social services)

The service is organized through an Operations Centre, which represents the interface through which the patient and his family can find listening, availability and solutions in response to needs and any problems regarding the services received.

The Operations Center coordinated by the Technical Director makes use of the collaboration of qualified professionals such as:

Specialized doctor; Administrative Coordinator; Officer in the Public Relations Office Nurse, Service Coordinator and professional nurses; Coordinator physiotherapist and rehabilitation professionals (physiotherapists, speech therapists, etc.); Center operators dedicated to intervention planning and communications with clients and operators. Social Health Operators (OSS); Psychologists; Social workers. All our operators are highly



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qualified professionals in possession of the relative qualification enabling them to practice the profession, verified by the Technical Management.

5. Activation times, taking charge, waiting list management

The assistance will be provided within 48 hours of receiving the Assistance Plan, or in shorter times for serious cases reported by the ASP.

In the event that the patient is placed on a waiting list, this will be managed according to criteria of accessibility, fairness, transparency to protect patients' rights.

The priority of taking care of patients on the waiting list will be shared and evaluated with the Health District of the ASP.

Con.so.sar. in taking charge of patients, it guarantees an effective and immediate taking charge of the case for the provision of I, II and III level Home Care, guaranteeing:
the operation of the take charge service for at least 5 days a week for Level II home care (access timing which will be assessed in relation to the specific case)
the operation of the care service 7 days a week for Level II and III home care

Following the accreditation, the consortium undertakes to quantitatively increase the number of assisted users, guaranteeing them the application of rigorous quality standards according to what is reported by reading the process indicators as required by the accreditation requirements.



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SERVICE PHASES



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Operational Objective	Measurement indicator	Threshold Value – Time	Percentage of acceptability
1. Starting the Service			
1.1 Acceptance and activation			
Respond to the request for activation of a service by the ASP	Activation time	Within 48 hours	90%
1.2 Verification of needs and indication of the activities to be carried out during the service			
Individualized Care Plan (PAI) Review	Presence of the PAI consistent with the needs	Within 48 hours	100%
2. Provision of the Service			
2.1 Processing Shifts			
Ensure punctual scheduling of services	Presence of the weekly "Round".	Within 48 hours	100%
2.2 Management of Service Variations The variations compared to the normal course of the service can be of two types: due to the needs of the provider of the professionals involved or due to the needs of the users. Con.so.sar. guarantees, as far as possible, the regularity of the service, notifying the user of the variation before the start of the service, and guaranteeing adequate replacement personnel.			
Allow the regularity of the service	Regular service and shared information	User informed of the change before the start of the service	100%
2.3 Access to Home			
Presentation of the service to the user	Knowledge by the user of the contents of the service, of the services to be provided and of the operators involved	Within the first login	100%
2.4 Reporting of emerging needs that require the change of the PAI			
2.4.1 Identification of new types of user needs			
Ensure an Individualized Care Plan consistent with needs over time	Consistent and up-to-date PAI	Within 10 days from the identification of the new need	100%
2.4.2 Periodic internal verification of the welfare situation			



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Guarantee an Individual Care Plan consistent with needs over time	Consistent and up-to-date PAI	For every need	100%
2.4.3 Checking the situation with the GP/PLS			
Guarantee an Individual Care Plan consistent with needs over time	Consistent and up-to-date PAI	Based on the customer's requests	100%
3. Evaluation of user satisfaction			
3.1 Management of reports and complaints			
Receive and process the reports received	Taking charge of the problem	Within 15 days	90%
3.2 User satisfaction evaluation questionnaire			
Have a return on activity from users	Updated report on user satisfaction levels	half yearly	100%
3.3 Home visit [or telephone contact] of the technical representatives			
Have a qualitative indication of the progress of the service	Updating the user's personal folder	Once a year	100%

The consortium provides the Home Care service by complying with all the Standards prescribed by the Client. The evidence of compliance with the standards in terms of quantity of care provided and quality of service provided in compliance with the requirements of the Regional Accreditation can be detected by consulting the registration, verification tools and periodic reports.

6. Quality factors

With the contribution of the professional skills of the staff and with the collaboration of families and institutions, the company is responsible for the quality of the services offered and undertakes to ensure that they meet the needs of the elderly.



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The quality factors to which the company refers are the following:

◇ Participation:

Assumption of responsibility by all members of the various components of society in relation to their role and competence;

◇ Efficiency:

Service delivery status;

◇ Efficacy:

Ability of the System to achieve the planned goals and objectives;

◇ Resource Upgrade:

Promotion of relations with local authorities and services in the area.

◇ Appropriateness of choices:

Coordination of staff that promotes continuity, orientation, verification and evaluation of the elderly.

7. Quality Standards

In order to clarify the roles of each interested party, general quality standards are defined for the provision of services which constitute a verification tool, both for the effectiveness of the service and for the satisfaction of the user himself

The start-up phase, which begins with the customer's first contact with the managers of the Cooperative and continues with the activation of the service.

The delivery phase: concerns all aspects of service implementation, as well as the management of any changes it may encounter. It ends with the interruption of the contractual relationship. 3. Evaluation: includes all the periodic monitoring activities aimed at guaranteeing the quality of the service. It takes place through different tools (questionnaire, personal interview...) and also wants to act as a moment of confrontation between the customer and the Cooperative.

Each phase described above has also been divided into other specific sub-phases.

Each phase identified in this way is entered in a table and developed through four categories:



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Operational objective: that is, the specific objective towards which the operations of that single phase tend;

Measurement indicator: inserted the specific and measurable object linked to the operational objective;

Threshold value: it is a quantity, usually expressed in terms of time, which indicates the standard of the Aretuseo Socio-Sanitary Consortium in achieving the operational objective

- Percentage of acceptability: i.e. the percentage of success with which the consortium on average reaches the operational objective, measured through the specific measurement indicator, in the specific threshold value

8. Perceived quality - user experience

The assessment of patient satisfaction is detected by completing a questionnaire aimed at highlighting the opinion on the services provided and the relative level of satisfaction; the data extrapolated from the questionnaire will form the basis for continuous improvement of the service. The survey is carried out on a predefined basis (annual) on a representative sample of users of the Service, the results are collected in an annual report which is shared with the figures involved in the service

9. Issue of health documentation

The user or a family member delegated by them or other subjects with legitimate status can submit a request to have a certified copy of the original of the health documentation relating to the service received. The request must be addressed to the Technical Management , accompanied by an identity document, which can be delivered directly to the office or sent to the e-mail address at: cososar@gmail.com



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The delivery times for the relative documentation are 5 working days, for the health documentation in our possession.

10. Requests, reports, complaints

To give value to the relationship of trust between clients and operators, we take special consideration of all reports and complaints. The complaint is accepted by the URP in written or verbal form.

Any request, report or complaint can be communicated:

- ▶ by sending an email to consosar@gmail.com;
- ▶ by accessing the appropriate section on the website;
- ▶ using the form that can be requested at the Con.So.Sar office or by e-mail.

We undertake to respond and intervene as soon as possible after having studied and carefully evaluated what has been reported.



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The processing of personal data of the assisted takes place in compliance with the provisions of Legislative Decree 196/03 and EU Regulation 2016/679

11. Publication of professional liability data

As there is currently no data to be published, it is however known that in order to comply with the obligation pursuant to art. 4 of Law 24/2017 which provides for the publication of data relating to all compensation paid in the last five years, verified as part of the exercise of the health risk monitoring, prevention and management function, the following data will be disclosed the number of outstanding claims and the amount of compensation referring to the years, as follows:

YEAR	RECIPIENTS	COMPLAINTS	REPORTS	COMPENSATION S
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12. Rights of the assisted

In light of the provisions of the Decree of the President of the Council of Ministers 19.05.1995 and the European Charter of Patients' Rights, the rights of the patients can be summarized as follows:

► RIGHT TO RESPECT PATIENTS' TIME

Everyone has the right to receive the necessary medical treatments in a short and predetermined time. This right applies to each stage of the processing.



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► RIGHT TO COMPLIANCE WITH QUALITY STANDARDS

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

► RIGHT TO SECURITY

Everyone has the right not to suffer damages deriving from the malfunctioning of health services or medical errors and has the right to access health services and treatments that guarantee high safety standards.

► RIGHT TO INNOVATION

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

► RIGHT TO AVOID UNNECESSARY SUFFERING AND PAIN

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



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► RIGHT TO PERSONALIZED TREATMENT

Everyone has the right to diagnostic or therapeutic programs that are as suitable as possible to their personal needs.

► RIGHT TO COMPLAINT

Everyone has the right to complain whenever he has suffered damage and to receive a response.

► RIGHT TO COMPENSATION

Every individual has the right to receive adequate compensation, within a reasonably short time, whenever he has suffered physical, moral or psychological harm caused by health services.

13. Duties of caregivers and family members

► COLLABORATION



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The assisted person undertakes to express his/her will regarding the persons authorized to receive information on his or her state of health upon acceptance (with the appropriate form which he/she will be asked to sign). to offer maximum collaboration to the operators who provide assistance by promptly reporting any environmental, social or personal situation that could be considered a source of risk to individual or collective health. The assisted person is required to regularly countersign the schedule of interventions carried out at home.

► INFORMATION

Inform doctors and healthcare personnel of everything that may be useful and necessary for better prevention, diagnosis, therapy and assistance. The assisted person has the duty to promptly inform of his/her intention to renounce scheduled treatments and services, so that waste of time and resources can be avoided.

► RESPECT

The assisted person must respect the personal and professional dignity of the operators, avoiding verbally and physically assaulting a healthcare professional in the workplace. the assisted person undertakes to comply with the rules which ensure the correct performance of the assistance and therapeutic activity.



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Without the signed consent of the assisted person, the medical staff cannot undertake any diagnosis and treatment activity, except in the cases provided for by law: necessity and urgency; or when the person, currently unable to express his will, is in danger of life.

14. Access to the service card

A copy of the Charter of Services is available at the Con So Sar headquarters in Via C. Forlanini 3/e Siracusa and is also accessible online at www.consosar.it

The Consortium undertakes to share this Charter of Services with the protection and voluntary associations representing the collective of users, to review the document periodically and to disseminate it through the website.

VALIDITY OF THE DOCUMENT

This service charter is valid from January 2023 and will be revised every two years or following significant changes, to improve the quality standards of the service offered

15. Contacts

Operations Center : Via C. Forlanini 3/e Syracuse

email : consosar@gmail.com

WWW.CONSOSAR.IT website

Technical Director : Dr. Walter Lutri

USEFUL NUMBERS T. 0931 093263

For information and assistance, the secretariat is open:
from Monday to Friday from 8:00 to 20:00



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Saturday from 8:00 to 13:00