

Service Charter

FONDAZIONE
CRINA



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Section I –

PRESENTATION OF THE CENTER

1. Purpose and services offered

The Foundation Center for Rehabilitation and Different Abilities (C.Ri.D.A.) in Prato is an integrated service facility primarily aimed at the population of the Prato area, particularly citizens affected by disabilities.

The purpose of the service is to **enable the maximum possible recovery of impaired functions following pathogenic or injurious events**, preventing secondary impairments, and treating disabilities to contain or prevent handicaps, allowing individuals with disabilities to achieve the best quality of life and psycho-social integration.

The treatments

It provides first-level home care services in accordance with **DGRT 732** of June 26, 2023. It has an agreement with **INAIL** to provide supplementary services (LIA) not covered by **LEA**. Additionally, it organizes group analgesic gymnastics courses in the gym and pool, and promotes group motor activity courses for individuals with chronic neurological conditions such as stroke, Parkinson's, and multiple sclerosis.

It is an authorized facility with **PG act no. 26166/2001** Municipality of Prato and **PG authorization 27579** of December 18, 2023, for the expansion of outpatient activities under **B2.6 Home Care - Home Care Base Level B2.6a and Integrated Home Care Level ADI of levels 1 82.6b** (headquarters at via Pacchiani, 4), **P.G 35620** of February 25, 2019 (headquarters at via Ferrucci 55), and **PG 61649** of December 15, 2017 (headquarters in Montale via Nesti, 2) accredited by deliberation **G.R.T. no. 20930 of October 24, 2022** - renewal (Law 51/2009).



Premise

The Service Charter represents a tool for communication between the Crida Foundation and users, as well as an institutional duty aimed at promoting citizen participation in healthcare policies.

It serves as an informative tool about the organization of Crida, the services provided, their access methods, and usage. It also constitutes a commitment with citizens, declaring what is offered and how through quality commitments.

Moreover, through the Charter, Crida can assess its operations and provide citizens with the opportunity for direct control. Real-time information on the services offered and their delivery methods, ensuring a simple and quick search method, is one of Crida's commitments.

To optimize time and resources, informative messages must be increasingly differentiated and utilize multimedia channels. The Service Charter, traditionally conceived as a single and often paper-based tool, is outdated and no longer sufficient to meet the informational needs of citizens. The Crida website, an interactive tool, can allow for quick consultation and selection of information.

Our Foundation aims to transfer the meaning of the Service Charter, as an informational and communicative body, to the website. The constantly updated website can then become "the place" where citizens can find immediate answers to their service-related inquiries and indicate areas for improvement.

The CRIDA Foundation **provides outpatient and home-based rehabilitative treatments, both privately and in agreement with the health service**, for functional recovery and rehabilitation (according to the former art. 26 of Law 833/78) and for physical medicine services (former art. 25 of Law 833/78). The rehabilitative treatments offered by C.Ri.D.A. are intended for individuals with the following conditions:

- neurological,
- orthopedic,
- rheumatological,
- geriatric,
- respiratory,

Additionally, C.Ri.D.A. caters to patients with:

- Primary and secondary lymphedema,
- post-surgery outcomes for breast cancer,
- outcomes of amputation,

C.Ri.D.A. also provides logotherapy services.

For detailed information about the contents of these activities, please refer to Section II - Information on the structure and informative services, and the informational brochure.

2. Fundamental principles

Equality

The services and benefits provided by C.Ri.D.A. are delivered on equal terms for everyone, without distinction of gender, age, race, language, social class, religion, and political opinions.

Impartiality

In the performance of their duties, the personnel of C.Ri.D.A. ensures the adoption of objective, fair, and impartial behaviors for all users.

Continuity of Therapeutic Assistance

Assistance to our patients is provided continuously and without interruptions, within the functioning methods defined by national and regional norms and regulations.

Participation

Patients and their families are assured participation in the provision of services, both directly and through volunteer associations and advocacy organizations.

Efficiency and Effectiveness

The CRIDA Foundation is consistently committed to ensuring that the services provided meet criteria of efficiency and effectiveness. To achieve this, there is ongoing attention to the quality of services, which is regularly assessed.

Right to Choose

The patient has the right to choose the service provider within the accredited public and private healthcare institutions.

Section II – Information on facilities and services

1. General information

The CRIDA Foundation operates through 2 outpatient facilities and 2 extramural facilities (pools).

To get in touch, please contact:

Information

Prato - Via Pacchiani, 4

Unified Number tel. 0574-442180

Phone Front Office from 8:00 am to 7:00 pm

Monday to Friday

Technical Secretariat

Prato - Via Pacchiani, 4

8:00 am - 12:30 pm, 3:00 pm - 6:00 pm

Monday to Friday

Outpatient facilities in Prato:

Prato - Via Pacchiani, 4

Unified Number tel. 0574 442180



Outpatient facility in Montale:

Montale - Via E. Nesti, 2

Unified Number tel. 0574 442180

Therapeutic Pool:

Prato - Via delle Gardenie – S. Giusto

Tel. 0574-630101

Headquarters:

Prato - Via Pacchiani, 4

Tel. 0574 442180

segreteria@fondazionecriida.it

fondazionecriida@arubapec.it

www.fondazionecriida.it

For structural and topographical features of C.Ri.D.A.,
please refer to the website.

Access to the facility

Access to the facility is allowed for all citizens affected by the conditions described in Section I, regardless of the recognition of disability, and subject to authorization from the Azienda Sanitaria Toscana Centro.

To avail oneself of the rehabilitative services covered by the agreement (former art. 26/L.833), it is necessary to present the **Rehabilitation Plan (PRI)** drafted by a physiatrist from the SOC Physical Medicine and Rehabilitation 2 of the Azienda USL Toscana Centro or by a specialist from a public facility.

Services in Physical Medicine (former art. 25/L833) requested by the treating physician must be booked through the CUP. For first-level home care services (DGRT 732 of June 26, 2023), an Individual Rehabilitation Plan (PRI) drafted by an external or internal physiatrist is required. At the time of booking, the service provides all information regarding the schedule, timings, and healthcare and administrative delivery methods.

Payment of tickets and contributions to health spending

The contribution towards healthcare expenses for affiliated rehabilitation treatments includes a basic fee of €38.00 for non-exempt citizens and €3.10 for exempt individuals, with no fee for those in the C01 and C02 categories. The contribution towards healthcare expenses for Physical Medicine (Pathway 2) entails a fee of €38.00. Exempt citizens are not required to pay any fees.

ERA	Family income less than €36,151.98	€ 38,00
ERB	Family income less than €36,151.98 to €70,000.00	€ 38,00+ € 32,00
ERC	Family income less than €36,151.98 €100,000.00	€ 38,00+ € 52,00
ERD	Family income less than €36,151.98 €100,000.00	€ 38,00+ € 82,00

Not exempt	€ 38,00
exempt	€ 3,10
Band C01	€ 0
Band C02 (route 2)	€ 0
Physical medicine quota	€ 38

2. Information on the main therapeutic activities

Outpatient services provided by C.Ri.D.A. are characterized by the comprehensive treatment of disability, which requires a simultaneous multidisciplinary approach. For each individual who seeks assistance from C.Ri.D.A., the multidisciplinary team formulates and develops a Treatment Plan. This plan includes one or more therapeutic programs that specify:

- objectives;
- interventions to be implemented with monitoring of the evolution and modifications of disability;
- timelines;
- verification methods;
- expected duration.

Rehabilitative treatments in the neurological and geriatric fields

Rehabilitative treatments in the neurological and geriatric fields encompass:

- Rehabilitation for spinal cord injuries, preparation for the correct use of aids, identification of suitable aids. Independence training;
- Rehabilitation for the consequences of vascular diseases (stroke), post-traumatic brain injuries, with the application of specific techniques (Bobath, Kabath, evocation of absent motor components Grimaldi). Cognitive therapeutic exercise;
- Treatment of degenerative diseases (Multiple Sclerosis, Parkinson's Disease, ALS, Muscular Dystrophy);
- Brachial plexus injuries;
- Treatment of peripheral neuropathies;
- Treatment of peripheral nerve injuries, with identification of splints and aids;
- Vascular diseases;
- Preparation and education for the use of prosthetics in amputations, treatment of the residual stump – functional.

Rehabilitation treatments in the orthopedic – rheumatology field

Rehabilitation in the orthopedic and rheumatological field includes:

- Treatment of deformities, scoliosis, and morphisms of the spine;
- Treatment of spine pain through relaxation techniques, myotensive techniques, proprioceptive methods, fascial treatment, connective tissue massage, pumping;
- Treatment of shoulder pathologies (sub-acromial conflict, consequences of adhesive capsulitis, consequences of dislocation surgery, habitual shoulder, post-traumatic consequences, shoulder and upper limb);
- Post-traumatic treatments for the knee, recovery after ligament reconstruction surgery, knee prosthesis, degenerative knee pathologies;
- Coxarthrosis treatments, consequences of hip prosthesis surgery, post-traumatic consequences;
- Treatment of consequences of herniated disc surgery, with recurrence of painful symptoms;
- Connective tissue surgery treatments for flat feet – valgus. Post-traumatic spine treatments; Rheumatoid arthritis treatments with identification of splints aimed at "joint preservation";
- Treatment of lymphedema with lymphatic drainage;
- Treatment of consequences of mastectomy surgery.

Speech therapy

The treatment provided not only addresses the realm of linguistic alterations but also those related to disorders and anatomofunctional mechanisms of other higher nervous activities (praxias, perception, intelligence, memory, etc.).

The treatment is designed following a thorough assessment to determine the residual abilities of the patient, using standardized tests to establish:

- The patient's verbal behavior in both expressive and receptive aspects, through oral and written channels and at various difficulty levels;
- Residual abilities in transposition tasks (repetition, reading aloud, writing under dictation, copying; also at various difficulty levels);
- The acquisition of data (information) about the patient's behavior.

Rehabilitation treatment of primary and secondary lymphedema

Combined decongestive physiotherapy in the treatment of lymphedema involves the "combined" use of multiple techniques: manual lymphatic drainage, intermittent pneumatic compression, multilayer compressive bandaging, isotonic exercises under bandaging, ultimately leading to the identification of the most suitable elastic compressive support for the patient.

Rehabilitation treatment of outcomes after post breast cancer surgery

The rehabilitative treatment for these patients involves the assessment of:

- Articular limitations affecting the scapulo-humeral joint;
- Hyposthenia of the muscles of the "scapulo-humeral" girdle;
- Imbalances in the spine as a consequence of the intervention;
- Outcomes of reconstructive surgery;
- Presence of axillary web syndrome;
- Lymphedema of the affected upper limb, and thus, the establishment of appropriate treatment.

Respiratory therapy

Respiratory rehabilitation is a multidisciplinary care program for patients with respiratory dysfunctions. This program is tailored to the patient to **optimize their autonomy and physical and social performance**. Respiratory rehabilitation reduces symptoms, increases work capacity, and improves the quality of life in individuals with chronic respiratory diseases, such as COPD, even in the presence of irreversible structural alterations.

C.Ri.D.A. ensures adequate information for users regarding the services and activities provided by the service. Access for family members to the facility is guaranteed at any time. Outpatient services are provided individually or in small groups, both at home and at extramural locations. As required by current regulations and requested by the Azienda Sanitaria Toscana Centro, approximately 10% of rehabilitation treatments at C.Ri.D.A. can be conducted in a home-based setting.

For each service, whether individual or group-based, a duration of one hour is guaranteed. The group consists of a maximum of 6 people.

The center ensures the full accessibility of spaces for all potential users with various types of disabilities, facilitated by the complete **absence of architectural barriers**. **User privacy** is also guaranteed. If the treatment plan includes water-based activities, the pool is utilized. The facilities have specific areas with dimensions, furnishings, and equipment suitable for carrying out rehabilitative activities.

In particular:

- Equipped areas for group activities (gyms), for static and dynamic activities,
- Equipped areas for individual activities (motor, respiratory, for communicative/cognitive disorders),
- Rooms for physical and instrumental massage therapy and joint manipulations,
- Medical office for specialized visits and diagnostic-prognostic clinical evaluations related to the treated pathologies (The medical office is unique for the entire rehabilitation facility and is located in Prato at via Pacchiani, n°4.),
- Accessible restroom facilities.
- Restrooms and changing rooms for staff,
- Changing rooms for patients,
- Waiting areas, secretarial activities, and archives tailored to the anticipated pathologies and volume of activities.

The instrumental equipment is quantitatively and qualitatively related to the needs of the users and the various types of activities, ensuring a safe, effective, and efficient implementation.

3. Multiprofessional team

The staffing level is proportional to the type of activity carried out in the facility and the volume of services. This is determined both based on the request from the Local Health Authority (ASL) through the signing of a contract and in reference to the objectives agreed upon with the Corporate Management. However, the presence of certain specialist doctors in disciplines related to the rehabilitative activities carried out in C.Ri.D.A. is ensured.

Furthermore, C.Ri.D.A. relies on physiotherapists who possess the necessary qualifications for the specific activity throughout the opening hours. The staff is equipped with identification badges. In addition to the employed staff, depending on the needs, C.Ri.D.A. also utilizes collaborating therapists, who will be progressively communicated to users by the Therapists Coordinator.

Section III - Quality of Services: Commitments and Programs of the Center

1. Quality of service

The CRIDA Foundation has a **Quality and Safety Manual** that meets and adapts to the requirements of the Regional Accreditation of Health Facilities, where every aspect of its institutional mission is detailed and explained.

2. Commitments and programs

The main commitment of C.Ri.D.A. is to pursue the continuous improvement of the quality of services and performances offered, as thoroughly defined in the organizational manual of C.Ri.D.A., which is available to users, ensuring full compliance with the fundamental principles of care outlined in Section I of this service charter.

Section IV - Tools for the protection of rights and verification

Indicators and Standards of Quality and Safety - Organizational Adaptation

C.Ri.D.A. identifies user satisfaction and employee satisfaction in performing their work as fundamental factors for the quality of services provided.

As a result, the following are identified as service quality indicators:

- User satisfaction index
- Employee satisfaction index

The tools for detecting and verifying these indicators are:

- a) Satisfaction questionnaire and form for feedback and/or complaints
- b) Internal climate questionnaire for employees

1. Complaints

Citizens can file complaints by **expressing their observations orally** to any company function or by **providing them in written form**, addressing them to the Public Relations Manager of CRIDA, who will take appropriate measures, or to the **Public Relations Office of the Azienda USL Toscana Centro** means:

- Email: urp@uslcentro.toscana.it
- PEC (certified email): urp.uslcentro@postacert.toscana.it
- Unified company number: 055 54 54 54, press 1, from Monday to Friday, 7:45 am to 6:30 pm, Saturdays and pre-holidays, 7:45 am to 12:30 pm.

The office, after evaluating the complaint, will initiate an internal investigation and provide a conclusive formal response to the user usually within 30-60 days.

If the citizen is not satisfied with the response, they may:

- Request recourse to the Joint Conciliation Committee (CMC), for organizational and/or relational aspects only.
- Request recourse to the office of the Civil Defender of Tuscany for technical and professional aspects as well.

2. User satisfaction questionnaire

In order to gauge the opinion that our Users have regarding the quality of services provided at the CRIDA Foundation, for several years now, a "**User Satisfaction Questionnaire**" has been prepared. Unlike a complaint, this questionnaire can be completed **entirely anonymously**.

The results of the surveys are published annually by the Health Management and are communicated to our staff, but most importantly, to the users themselves.

3. Audits

The C.Ri.D.A. Management periodically verifies compliance with the quality standards outlined in Section III through appropriate Audits.

4. Document Request

The request for documentation (Rehabilitation Folder, Medical Report, Physiotherapy Report) can be made by the user or their delegate using a specific form provided by the secretariat or downloadable from the website.

A copy of the requested documentation will be available within 7 days from the submission of the request and will be handed over to the requester.

Section V – Clinical Risk and Patient Safety Management – Adoption of Regional Best Practices and Recommendations from the Ministry of Health

1. Clinical Risk and Patient Safety Management

Clinical risk management is a process aimed at continuous improvement of clinical practice **through organizational methods capable of identifying and controlling risks**, minimizing the occurrence of errors, and ensuring patient safety, as much as possible, in all phases of rehabilitation pathways.

The clinical risk management process should be based not on the search for blame but on the opportunity to learn from mistakes. The CRIDA Foundation has a Clinical Risk Management Manager assisted by a Facilitator. The process involves several phases: identification, assessment, treatment, monitoring, and risk prevention.

For each of these phases, specific tools have been adopted:

- Incident reporting
- Safety rounds in the facilities for risk identification purposes

For **Clinical Risk Management** and the promotion of **User safety**, the following objectives are envisaged:

- Promote a safety culture
- Identify risks present in the corporate reality
- Undertake targeted actions to identify, reduce, and prevent the incidence of adverse events for users and operators
- Improve the quality of service offered to users
- Promote the development of tools for patient safety

Adhere to Regional Practices and Recommendations of the Ministry of Health.

2. Regional Practices and the Recommendations of the Ministry of Health

The Foundation has also established a procedure for preventing patient falls in gyms, pools, and at home, which is an integral part of the corporate Clinical Risk Management system. Crida holds credentials for accessing the **SIMES system** to report incidents (events, near misses, sentinel events) for monitoring errors in healthcare.

Insurance Coverage

Type: RCT.

Policy number: 50 43484ly of the insurance company-Sara Assicurazioni.

Maximum limits: maximum limits per RCT claim of €3,000,000.00, maximum limits per RCO claim/person.

Minimum deductible for damage to property: €500.00.

Contacts



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“ Improve patients' quality of life:
our mission ”



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