CHARTER OF HEALTH SERVICES

HEMODIALYSIS CLINIC “EURONEFRO S.r.l”.

Partita IVA/Codice Fiscale: 01949460602

SEDE OPERATIVA: VIA MARITTIMA 342 – FROSINONE

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Reference Standards

This "Service Charter" has been drawn up in accordance with the following regulations:

- Decree of the President of the Council of Ministers of 19 May 1995 "General reference scheme of the charter of public health services";
- Ministry of Health - Guidelines no. 2/95 "Implementation of the charter of services of the National Health Service".

This Service Charter, pursuant to Article 17 paragraph 2 of Regional Regulation no. 3 of 31/07/06, has been updated and submitted to the professional categories and protection and voluntary associations representing the user collective.

Job Category

ANISAP Associazione Nazionale Istituzioni Sanitarie Ambulatoriali Private

Protection and Volunteer Association representative of the user collective

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SECTION ONE

1. COMPANY PRESENTATION AND FUNDAMENTAL PRINCIPLES

1.1 WELCOME NOTE

Dear Madam, Dear Sir, we have hereby deemed it useful to provide you with a Guide that will help you to orient yourself and get to know the Health Facility to which illness forces you to turn.la Sua
This Service Charter (dedicated to a particularly problematic group of Patients) is conceived above all as a means for the beginning of an increasingly close and constant relationship of dialogue and collaboration with the Citizen Users, in order to improve the quality of the services offered, making them more efficient and timely, but above all closer to the needs of those who use them.
We are firmly convinced that the more the relationship between Citizen, User and Staff is based on mutual trust and knowledge, the more the effectiveness and overall efficiency of the system grows and the greater the results.
Thank you for your attention and remain at your disposal for any further information.

1.2 PRESENTATION OF THE HEMODIALYSIS CLINIC

The Medical Center, located in Frosinone in Via Marittima 342, is the result of the will of a Limited Liability Company.
All staff (General Manager, Medical Director, Doctors, Professional Nurses, etc.), each within the scope of their specific function with well-defined tasks and responsibilities, operate taking into account the following fundamental aspects:

- *The nephropathic patient, from the first recognition of his disease, needs therapeutic continuity, which means being followed by a suitable structure throughout the natural history of the disease.*
- *The dialysis patient is a chronic and complex patient in whom, as a result of impaired kidney function and dialysis treatment, many organs can suffer damage that worsens over time, particularly to the cardiovascular, nervous, bone, endocrine and psychic systems.*

For these reasons, he needs, in addition to an Outpatient Facility (like ours) that is able to deal with the physical problems of his condition, also the integrated support of other external Specialists for the timely diagnosis and consequent therapy of all possible clinical complications.

The patient undergoing hemodialysis treatment (and his family), therefore, needs adequate psychological support, which helps him to accept and live with his state of chronic illness and at the same time supports him in the effort to achieve the best possible rehabilitation and social reintegration.

In light of this, the fundamental objective that the Center proposes to continuously pursue in the provision of its services is the satisfaction of both the User (the Patient) and the Customer (the National Health System) in line with the company policy for quality.
With this in mind, the Centre pursues the objective of obtaining institutional accreditation from the National Health System and maintaining it over time (as a guarantee for citizens of the quality of the service provided) and to adopt a Quality Management System compliant with the international standard UNI EN ISO 9001 for the activities of the haemodialysis clinic.

In this vision, specific indicators and related quality standards relating to accessibility, humanization, user satisfaction and appropriateness of care are identified and monitored.

1.3 HOW TO REACH THE CENTER

The Center is located in Frosinone, Via Marittima 342 in a position easily accessible by public transport, with the possibility of parking easily in the immediate vicinity.

1.4 FUNDAMENTAL PRINCIPLES

The provision of the services described in the Service Charter is inspired by the following fundamental principles:

- **Equality**: the rules that govern relations between users and guarantee equal treatment for all, respecting the dignity of the person and particular needs, such as those of the disabled, without distinction of sex, race, nationality, religion, language, political opinions and social condition.
- **impartiality**: the Centre undertakes to conform its behaviour to the principles of equity and justice, therefore the staff will avoid attitudes of partiality and injustice or discrimination.
- **Continuity**: Health protection knows no breaks, the service and services are regular and uninterrupted. The user is guaranteed the continuity of the necessary care within the limits of the services offered by the Center and defined in this Service Charter.
- **Right to choose**: this right is an integral part of the broader rights of personal freedom and free movement of the citizen.
- participation: the participation of the user will always be allowed, both to guarantee the right to the correct provision of the service and to encourage collaboration with providers. The user has the right to access the information concerning him/her, in the possession of the provider, in accordance with the provisions of Law 241/90. The user can produce memoirs and documents, make observations, make suggestions for improving the service and has the right to rapid feedback on what has been reported or proposed.
- **efficiency and effectiveness**: the Centre ensures that the service is provided efficiently, through the identification, elimination and replacement of inadequate resources, and effectively through the activation of quality control. In fact, the activities, services and treatments provided in the Centre are aimed at the effective resolution of health needs, while assessing the resources used and necessary in the provision of these services.

PART TWO

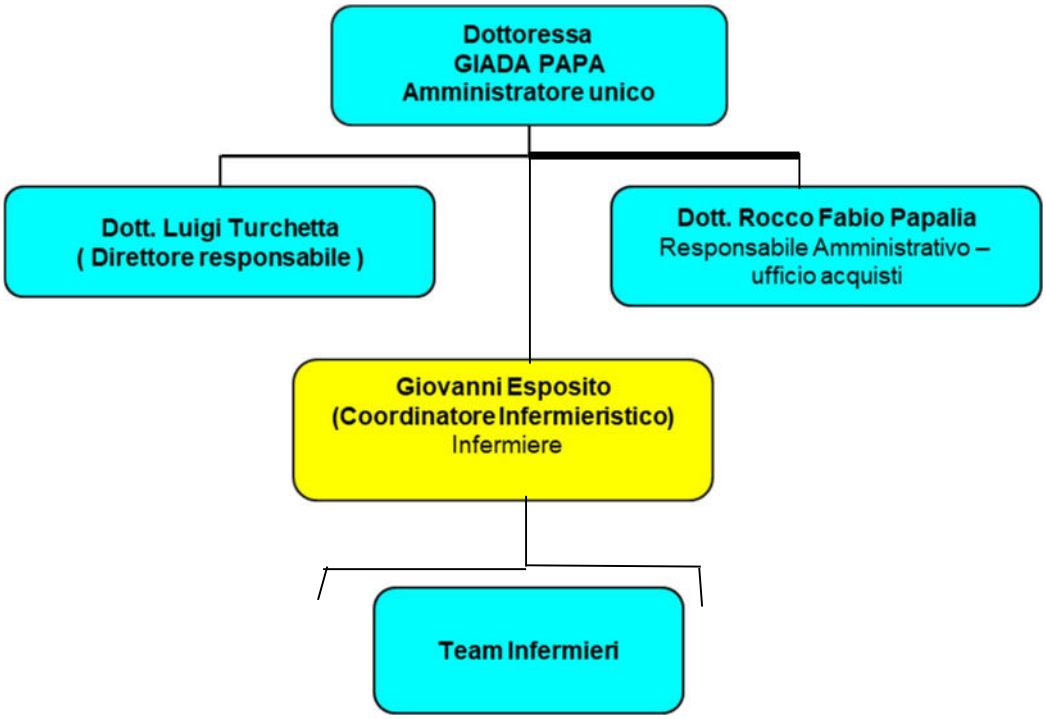
2. INFORMATION ON THE STRUCTURE AND THE SERVICES PROVIDED

2.1 TYPE OF SERVICES PROVIDED

The Hemodialysis clinic is able to provide patients with specialized services in terms of diagnosis and therapy during the phase of dialysis replacement therapy. Within a common professional team path, each Doctor has brought his or her own personal in-depth analysis of topics of particular interest or relevance.

2.2 ORGANIZATION

The functional organization of the Medical Center is shown below:



The potential of the Center for the routine treatment of chronic uremics is 13 kidney places, located in a single room, with computerized management of dialysis treatment.
HCV positive patients who present clinical and/or serological signs of potential infectivity are dialysed on dedicated devices, identified with indelible signs, while adopting the universal precautions issued by the CDC in Atlanta and specific measures.
Hbs Ag positive patients are dialysed in rooms equipped with changing rooms, septic processing and separate toilets.
The service, from Monday to Saturday, normally three times a week, can be divided into up to 3 daily shifts, depending on the needs of the user, according to the following table:

	Lunedì – Mercoledì – Venerdì	**Martedì – Giovedì – Sabato**
I Turno	06,30 – 10,30	06,30 – 10,30
II Turno	11,30 – 16,30	11,30 – 16,30
III Turno		

The Center has equipment that complies with current legislation, managed and controlled according to the procedures in force of the Quality Management System.

2.3 ACCESS AND PAYMENT METHODS

In order to access the outpatient services provided by the Centre, the User is invited to read this Service Charter, to hand in *the updated health documentation (examinations and diagnostic tests already performed, previous medical records), an identification document, tax code and health card.*
The patient must provide the Centre with the medical prescription completed in its entirety by the attending physician and in any case in compliance with the regulations in force on health services provided under institutional accreditation.

There are no charges to be borne by the User according to current legislation.

2.4 ANCILLARY SERVICES

INFORMATION

The Centre is happy to provide all the necessary information to Users/Customers during opening hours, also by telephone (by calling 0775291929- euronefro@nefrocenter.it).

COMFORT and ORDER

The room where the dialysis treatment takes place is equipped with an air conditioning system to make the User's stay in the room as comfortable as possible, both in the hot and cold season.

Inside the premises it is strictly forbidden to smoke and cause disturbance with a high tone of voice (this is due to legal provisions and out of respect for one's own health and that of other Users).

The cleaning of the rooms is carried out regularly by the staff and according to the procedures provided for by current legislation.

SAFETY

The Centre's staff is trained and adequately prepared to protect the physical safety and security of Users at all times. In fact, the Centre meets all the structural, organisational and technological requirements provided for by the current accident prevention and fire regulations.

PART THREE

3. QUALITY STANDARDS, COMMITMENTS AND PROGRAMS

The Centre adopts a Quality Management System and Institutional Accreditation that complies with the general and specific requirements envisaged.
In particular, with reference to Health Care and Quality of Service, continuous monitoring of the health status of Patients is guaranteed according to the procedures/instructions/protocols provided for by the protocols and regulations in force.

Starting from the User's experience, analyzing all the moments of his journey during his stay in the structure, the relevant aspects for the perception of the quality of the services provided by the Center were identified, on the one hand, and, on the other, the quality standards already achieved and those to be pursued through planned actions.

3.1 ACCESS TO THE STRUCTURE AND RECEPTION

- Access to outpatient services includes the simplified procedure for new Users/Clients reported in paragraph 2.3 and reproduced here to underline *the* Centre's commitment to meeting the needs of patients, with courtesy and availability from the first meeting.

- The Customer-User (patient or guardian), in addition to being informed about the disease, any disabilities related to it, and the possible occurrences of the phase following the care and administrative pathway, is also informed **of the severity assigned** as summarized in the Medical Record by the **referring doctor** (holder of the assigned dialysis shift).

- The Health Management undertakes to inform each User of the possibility of being able to make reports (suggestions and/or complaints) on the Quality of the service provided. The methods for compiling, forwarding and collecting the reporting forms and the response times to suggestions/complaints are defined in Section 4 of this Service Charter.

- The medical and paramedical staff collects from the User/Client any requests relating to his/her attendance at the Centre and provides the main information on the Facility and the location of the services. In addition, it offers full availability to accompany particularly needy subjects within the premises.

3.2 OUTPATIENT DIALYSIS ACTIVITY

- **Service continuity**
  It is ensured according to the requirements of current legislation and the potential of the Centre.
  The User, in exceptional cases of unavailability of the Facility, is given the opportunity to choose to carry out dialysis treatment at an appropriate health facility in the area.

- **Regularity and punctuality of the service**
  They are insured according to the personalized program established by the Health Management and the User/Client.

- **Cleaning of the toilets, changing rooms and dialysis treatment room**
  Whenever necessary and in any case always at the end of dialysis treatments.

- **Comfort of the premises and safety of the equipment**
  Adequate air conditioning throughout the year and systematic verification of the correct functionality of the equipment for the safety of patients and staff.

- **Health care**
  Continuous monitoring of the patient by healthcare personnel, according to the rules provided and the general and specific requirements for Accreditation (e.g.: monitoring of indicators of dialysis adequacy Kt/V, vascular access functionality, implementation of anemia treatment protocols, control of osmosis water, etc.).

- **Relations with personnel and information to the User**
  Full availability to provide information according to the respective competences of the operators is ensured. In particular, it is the duty of the medical staff, among other things, to provide patients with all the information relating to the procedures for accessing the Lists of Kidney Transplant Centers.

- **Humanization Aspects**
  Respect for privacy and human dignity:
  - personalized therapeutic treatments and clear information on them;
  - the User's right to be identified by his or her name and surname and not by the name of the disease or medication associated with him/her;
  - health documentation kept in protected and controlled archives;
  - clear information on data processing.

3.3 RESIGNATION

- **Ease of obtaining health documentation**
  The Health Management delivers a copy of the health documentation in real time when requested by the User/Customer.

- **Simplicity of complaint reports and/or suggestions**
  According to what is reported in Section 4 of this Service Charter.

PART FOUR

4. PROTECTION AND VERIFICATION MECHANISMS

4.1 PATIENT RIGHTS

- The dialysis patient has the right to receive treatment appropriate to his clinical needs to achieve the best state of well-being compatible with his situation.
- The dialysis patient has the right to receive all the medical and nursing assistance, provided for by current regulations.
- The dialysis patient has the right **to be treated** in a Health Facility that meets the rules of accreditation with the NHS in terms of the technological adequacy of the equipment, the professionalism of the Health Staff and hotel comfort. For patients at high risk of complications, the Center is able to offer the essential services to implement urgent and emergency procedures.
- The dialysis patient **has the right to be informed** about any aspect of his disease and about any diagnostic and therapeutic measure that is deemed necessary by the doctor.
- The dialysis patient **has the right, at any time, to respect for his or her personality** and modesty and to observe the rules of hygiene and prophylaxis for the prevention of infectious and contagious diseases.
- The dialysis patient **has the right to social**, scholastic and work integration, and the times and methods of dialysis therapy must take into account these needs, compatibly with the organizational and logistical possibilities of the Center.
- The dialysis patient **has the right to request a change in the dialysis shift**, which will be granted, compatibly with the organisational possibilities of the Centre, as soon as places become available, and respecting the chronological priority of the requests.
- The dialysis patient **has the right to express**, directly or through his or her representatives, **any dysfunctions and/or deficiencies** of the Dialysis Centre. Any remarks must first be made explicit to the Medical and Nursing staff of the Centre, and, if not satisfied, to the bodies of the Local Health Authority competent in the matter.

4.2 PATIENT DUTIES

- The Dialysis Patient has the duty to collaborate with the Health Personnel in the optimization of the service and to follow the dialysis, dietary and therapeutic program prescribed by the Doctor.
- The dialysis patient has the duty to respect the work and professionalism of the Healthcare Professionals.
- The dialysis patient has the duty to comply with the rules of cleanliness and personal hygiene, the rules of civil coexistence with other patients and the general rules of attention and care for the environment and the structure he uses.
- The dialysis patient has the duty to respect the hours of the Dialysis Center and the assigned shifts.
- The dialysis patient has the duty to inform the Dialysis Center Doctor of any other therapy practiced, prescribed or self-prescribed elsewhere.
- The dialysis patient has the duty to collaborate with the doctor in the management of his or her state of health: he or she is required to ask for information on his or her clinical conditions, and to inform the doctor of any emerging symptoms in order to obtain the necessary assistance.
- The dialysis patient has the duty to comply with the regulations in force regarding the prescription of drugs and laboratory-instrumental tests.

4.3 FUNCTIONS AND REGULATIONS FOR PROTECTION AND VERIFICATION

The Centre guarantees the function of protection towards the User/Customer also through the possibility, for the latter, to formulate suggestions and to file complaints following disservice, act or behaviour that has denied or limited the usability of the services or infringed one of their rights.
Suggestions and/or complaints can be submitted, in writing or verbally, to the Health Directorate (which also acts as Public Relations Office), every day and during the opening hours of the Centre.
The Health Management receives observations, suggestions, oppositions or complaints in any form presented by Users/Customers. It shall provide an immediate response to the same that may be of immediate solution, otherwise it shall prepare the preliminary investigation and carry out whatever else is provided for in the following

Public Protection Regulations.

- **Art. 1**

Customers/Users may submit suggestions, observations, oppositions, complaints or complaints against acts or behaviours that deny or limit the use of health care services, or infringe one of their rights.

- **Art. 2**

Patients and other subjects as identified by art. 1, exercise their rights with:
- letter on plain paper, issued directly or addressed and sent to the Health Management of the Center;
- compilation of a special form delivered to each patient of the Center by the Health Management.**;**
- report by telephone, fax or e-mail to the Health Directorate;
- interview with the head of the Health Directorate.

For telephone reports and interviews, a special form will be drawn up, noting what has been reported and acquiring the data for the relevant communications. The verbal report will be received in the presence of a witness.

- **Art. 3**

Observations, oppositions, complaints or complaints must be submitted in the ways listed above, **within 15 days** from the moment the data subject became aware of the act or conduct detrimental to his or her rights.

- **Art. 4**

The Health Directorate accepts complaints, oppositions and observations submitted pursuant to art. 1 of these regulations; it provides for the preparation and definition of reports that are easy to resolve; arranges for the investigation of complaints and distinguishes those that are easier to resolve, giving a timely response to the patient; sends the response to the patient; reactivates the same procedure for reviewing the complaint if the patient declares the response received unsatisfactory.

Below is the model of the Reporting Form.

The Centre ensures that the objectives and standards set are verified, giving appropriate publicity to the results achieved.

Patient satisfaction surveys will also be promoted, promoting, where appropriate, questionnaires, sample surveys and direct observation through monitoring groups.

REPORTS SHEET

HEMODIALYSIS CLINIC DIALYSIS EURONEFRO S.r.l.

Form for reporting malfunctions - suggestions - complaints

To the Health Directorate

o Minutes o Tel/Fax/E-mail o With form o With letter attached

(*) _____

inhabitant in (*)_____

telephone (*)_____

Subject of the report

_____
_____
_____
_____
_____
_____
_____
_____

Received the _____ from_____

Signature_____

(*) not mandatory and in any case data processed in compliance with privacy (Legislative Decree 196/03)