

SERVICE CHARTER **CAMPANIA**



HOME CARE SERVICES **CAMPANIA REGION**



Operatori Sanitari Associati



Dear Client,

With this document we wish to present our Cooperative and the Home-Care services we provide in the Campania Region. You and your family play an important role within our organisation.

Through this Service Charter we would like to encourage your valued and active participation in the care pathway so that we can further improve the services we offer.





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(reworked from the Prime-Ministerial Decree 19 May 1995 and the European Charter of Patients' Rights)	
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WHO WE ARE

O.S.A. - Operatori Sanitari Associati - is a not-for-profit Social-Work Cooperative (ONLUS) founded in Rome in 1985 by a group of doctors, psychologists and social workers active in home care.

In nearly forty years we have become a major player in healthcare services, developing numerous partnerships with Local Health Authorities (ASL), Provincial Health Authorities (ASP) and Hospitals, and diversifying the social-health services we provide (nursing homes, therapeutic communities for psychiatric patients, family homes for minors, retirement homes).

More than 50 000 people receive home care from us each year across Italy, thanks to the work of almost 3 200 healthcare professionals and care workers.

With our professionals we provide health and social-health assistance on behalf of the ASLs and ASPs we partner with in:

- » Lazio
- » Abruzzo
- » Puglia
- » Sicilia
- » Sardegna
- » Campania
- » Basilicata

HOME CARE: WHAT IT IS & HOW TO ACCESS IT

Home Care is a coordinated set of health and social-health activities (medical, nursing, rehabilitation, psychosocial, educational) delivered at the patient's home. Clinical responsibility rests with the General Practitioner or Primary-Care Paediatrician.

Service activation lies with the Health District, which draws up the Individual Care Plan (PAI) according to the client's needs. The patient or legal guardian chooses a provider from the District's list of qualified suppliers.

Depending on the client's condition, health care may be combined with social-care services financed by the municipalities.

Objectives of Home Care (Gli obiettivi dell'assistenza domiciliare)

- **Assist** people with conditions treatable at home in their family environment, avoiding unnecessary hospital or residential admission.
- **Enable** the prompt, gradual return home of patients discharged from hospital, actively involving and supporting family members in the care activity.
- **Foster** cooperation and integration between community and hospital services.

Home Care is available to all citizens who, for health and/or social reasons, cannot autonomously reach residential or hospital services, either temporarily or permanently, including EU citizens temporarily domiciled for study or work and STP (temporarily present foreign nationals) with home-care needs.

Service activation

The service can be activated in two ways:

- ▶ The general practitioner, the paediatrician, or any physician of the National Health Service (SSN) issues it to the care recipient.
- ▶ Protected discharge requested by the hospital where the client is admitted.

The District assesses the case, drafts the PAI together with the the general practitioner or the freely chosen paediatrician, and shares it with the patient and family/caregiver. The PAI sets objectives, duration, delivery methods and professionals involved (nurse, physiotherapist, etc.). Once OSA receives the PAI we organise home assistance, ensuring continuity of care.

Specific features:

- ▶ At least one cohabiting person must cooperate with the service (e.g. grant access to professionals, notify the Operations Centre of any inability to receive the visit).
- ▶ Interventions are scheduled to meet chronic and disability-related needs.

PROCESS PHASE	ACTIVITY	RESPONSIBILITY	ACTION DIRECTED TOWARDS
Report	Formal / informal communication	Hospital MD, Social Services, family, acquaintance, volunteer, MMG/PLS	If sent to District, it provides service info
Home-Care request ADI	Submission of formal activation request	MMG/PLS/Doctor SSN	Second District
Multidimensional Assessment (VMD)	Clinical & socio-environmental assessment	DISTRETTO	Patient& family
Individual Care Plan (PAI)	Drafting of document with activities, professionals, frequency	DISTRICT and actors involved (Accredited provider, GP/ PLS, assisted person and family members/caregivers)	Patient& family
Choice of provider OSA	Patients indicates OSA on District form	Patient& family	DISTRICT
Service start by OSA	District sends PAI to OSA for taking the patient into a care	DISTRICT	Cooperative OSA
Care delivery	OSA assigns and sends professionals home care	Cooperative OSA	Patient, family and health professional
Monitoring & review	Ongoing evaluation and periodic PAI review	OSA, all stakeholders involved in the Individual Care Plan (PAI), MMG/PLS, hospitals, according to the their own expertise with PAI.	Care team & family
Continuity of care	Team meetings, shared documents, information transfer	OSA, all stakeholders involved in the Individual Care Plan (PAI), MMG/PLS, hospitals, according to the their own expertise with PAI.	Patient, care team & family
Discharge	End of care (improvement, transfer, refusal, death)	the general practitioner or paediatrician and the Health District, on the basis of documentation provided by Cooperativa OSA	Patient & family

OUR ROLE IN HOME CARE

- › Implement the care plan by organizing and carrying out all activities
- › Implement the PAI, organising and performing all activities at clients' homes with dedicated nurses, rehabilitation professionals, doctors, etc.;
- › **Build trust** with patients and families through attentive listening and rapid, concrete responses, thanks to our flexible organisation;
- › **Guarantee** constant coordination and supervision of the service;
- › **Work** closely with all parties involved (ASP, family doctors, hospitals, social services).

Organisation of care

A **Technical Directorate** coordinates and supervises services to safeguard patients and families and ensure quality. Care is run from an OSA Operations Centre located in the same area as the ASL; it is the permanent point of contact for and families.

The service is organized at an OSA Operations Center located in the same ASL territory. The Operations Center aims to be the place where the patient and their family can consistently find a listening ear, availability, and solutions in response to their needs and any issues regarding the services received.



GRUPPO DI COORDINAMENTO DELLA CENTRALE OPERATIVA

- › Technical Director - service manager
- › Operations-Centre Specialist MD
- › Administrative manager
- › Nurse coordinator
- › Physiotherapist coordinator
- › Schedulers, patients and operators liaisons

PROFILI PROFESSIONALI

- › Specialist doctors
- › Nurses
- › Occupational & neuro-psychomotor therapists
- › Health-care assistants (OSS)
- › Psychologists
- › Dietitians
- › Social workers

Types of services offered

According to the PAI, OSA can provide:

- › Nursing care
- › Rehabilitation
- › Specialist medical care
- › Social-care/OSS support
- › Psychological care
- › Dietetics
- › Social-work services

Tele-medicine services

- › Vital sign
- › tele monitoring
- › video-consultation
- › tele-consulting
- › tele-cooperation
- › tele-cooperation
- › tele-rehabilitation

Patient give informed consent as required by law. Personal data are processed in compliance with Legislative Decree 196/03 and EU Regulation 2016/679.

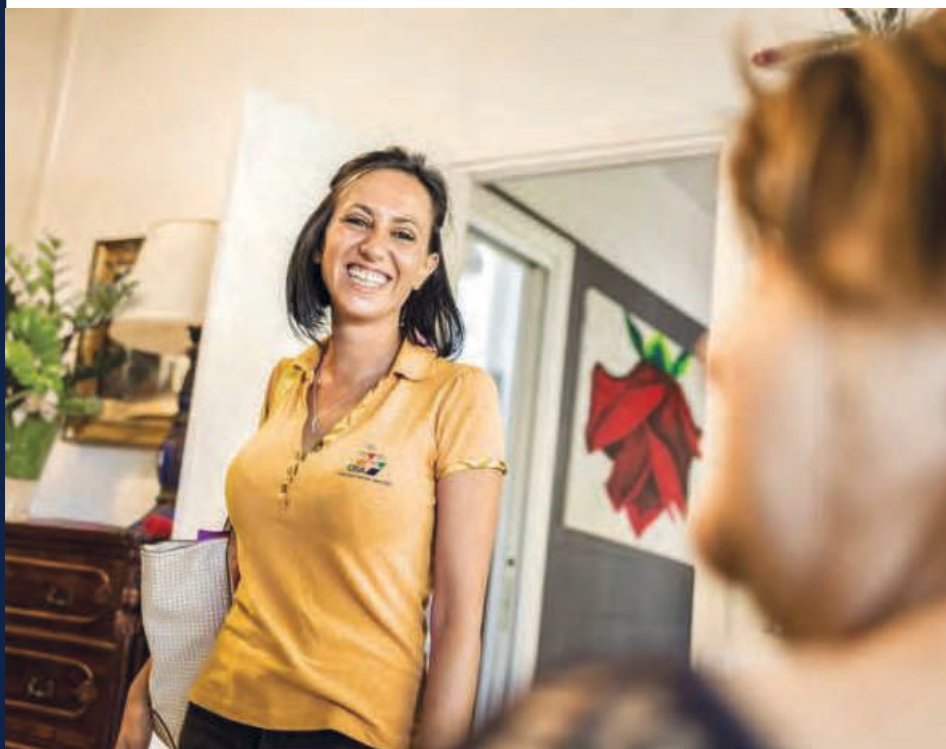
OPERATIONS CENTER HOURS

- › Operations Center opening hours: The operations center is open from Monday to Friday from 8:00 AM to 8:00 PM and on Saturday from 8:00 AM to 2:00 PM;
- › Telephone availability: 8:00 AM - 8:00 PM on weekdays, 8:00 AM - 2:00 PM on Saturday. Activation of the voicemail (remotely accessible) during the following times:
- › 8:00 PM - 8:00 AM (weekdays); Saturday from 2:00 PM until 8:00 AM on the first working day; from 12:00 AM to 12:00 AM on holidays;
- › Service hours: home service is provided from 8:00 AM to 8:00 PM, and also on holidays if provided by the care plan;
- › Medical-nursing availability: from 8:00 AM to 8:00 PM every day including holidays and weekends.



QUALITY AND SAFETY OF CARE

All our operators are highly qualified and hold the necessary professional licences. OSA provides continuous training and updates, following international quality and safety standards, supported by an internal team dedicated to these themes. The Operations Centre is the hub for quality control and continuity of care.



LA PARTECIPAZIONE DELL'ASSISTITO E DELLA SUA FAMIGLIA

Perceived quality and sharing of experience

Since the early years we have measured perceived quality through questionnaires and interviews conducted by qualified professionals.

Suggestions, compliments & complaints

Per dare valore al rapporto di fiducia tra gli assistiti e i professionisti della nostra Cooperativa, teniamo in particolare considerazione tutti i suggerimenti, gli elogi e i reclami che ci vengono segnalati.

We value all feedback as it helps us continuously improve.
Send reports:

E-mail: reclami@osa.coop

Phone: 081 3778726

We commit to respond and act as soon as possible after careful evaluation.

ACTIVATION TIMES & WAITING-LIST MANAGEMENT

Intake times

Care starts within 24 hours after OSA receives the PAI.

If a waiting list is necessary, it is managed transparently and fairly. Priorities are shared with the ASL District and based on:

- › Clinical & social indicators from the assessment
- › Statutory urgency criteria
- › Chronological order of requests
- › Changes in the client's conditio

RELEASE OF MEDICAL DOCUMENTATION

Health records are accessible to the patient throughout the entire care pathway.

A copy of the health records may be requested by the Owner of the records, or by a person expressly delegated by him or by other figures in possession of legitimate status.

The request for health documentation, accompanied by an identity document, must be addressed to the operations center with a specific form, which can be delivered directly to the OSA Operations Center of reference or sent to the email address: osa@pcert.it

The available health documentation will be delivered to the interested party or his delegate within 7 days of the submission of the request, preferably in electronic format; any additions will be provided within 30 days of the submission of the same. (Law 8 March 2017 n.24 Art.4 "Transparency of data").

PROFESSIONAL-LIABILITY DATA PUBLICATION

In order to comply with the obligation under Article 4 of Law 24/2017, which requires the publication of data relating to all compensation paid over the past five years, verified within the scope of the function of monitoring, prevention, and management of healthcare risk, the following data regarding the number of claims filed and the amount of compensation paid for the period from January 1, 2019, to January 1, 2023, are disclosed.

Claim & compensation table – last five years AI SENSI DELL'ART.2, C 5 DELLA L24/2017).		
YEAR	No. of Claims	Compensations Paid
2019	1	0
2020	0	1
2021	0	1
2022	2	0
2023	0	0
2024	0	0

OSA fulfils all mandatory civil-liability insurance requirements; policy details are published on our institutional website.

Service-quality standards & legality rating – our commitments

The Cooperative fulfills the civil liability insurance obligations required by current legislation. The details of the insurance contract are published on the Cooperative's official website.

OSA operates a Quality-Management System compliant with:

- ISO 9001 - Quality Management Systems;
- ISO 45001 - Occupational Health and Safety Management Systems;
- ISO 14001 - Environmental Management Systems;
- ISO 50001 - Energy Management Systems;
- SA8000 - Corporate Social Responsibility;
- Pdr 125 - Gender Equality.

PERCEIVED QUALITY - USER EXPERIENCE

Patient satisfaction is assessed through the completion of a questionnaire aimed at highlighting feedback on the services provided and the corresponding level of satisfaction; the data extracted from the questionnaire will serve as the basis for the continuous improvement of the service.

The survey is conducted at predetermined intervals on a representative sample of service users. The results are published on the official OSA website and in the Social Report.

THE RIGHTS AND RESPONSIBILITIES OF CLIENTS

(Reworked from PM Decree 19 May 1995 & European Charter of Patients' Rights)

RIGHTS

- › Right to preventive measures: every individual has the right to appropriate services for the prevention of disease.
- › Right of access: every individual has the right to access healthcare services required by their state of health, without discrimination based on financial resources, place of residence, type of illness, or time of access to the service..
- › Right to information: Every individual has the right to access all information concerning their state of health, healthcare services, and how to use them, as well as all information made available by scientific research and technological innovation.
- › Right to consent: every individual has the right to access all information that enables them to actively participate in decisions concerning their health. This information is a prerequisite for any procedure and treatment, including participation in clinical trials.
- › Right of free choice: every individual has the right to freely choose between different healthcare procedures and providers based on adequate information.
- › Right to privacy & confidentiality: every individual has the right to confidentiality regarding personal information, including details about their health status and potential diagnostic or therapeutic procedures. They also have the right to protection of their privacy during diagnostic tests, specialist visits, and medical-surgical treatments in general.
- › Right to respect for patients' time: every individual has the right to receive necessary healthcare treatments in a timely and predetermined manner. This right applies to every stage of treatment..
- › Right to quality standards: every individual has the right to access high-quality healthcare services, based on the definition and adherence to precise standards.
- › Right to safety: every individual has the right not to suffer harm resulting from the malfunction of healthcare services or medical errors. They also have the right to access healthcare services and treatments that guarantee high safety standards.

- › Right to innovation: every individual 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 & pain: every individual has the right to avoid as much suffering as possible at every stage of their illness.
- › Right to personalised treatment: every individual has the right to diagnostic or therapeutic programs that are as tailored as possible to their personal needs.
- › Right to complain: every individual has the right to make a complaint whenever they have suffered harm and to receive a response.
- › Right to compensation: every individual has the right to receive adequate compensation, within a reasonably short timeframe, whenever they have suffered physical, moral, or psychological harm caused by healthcare services.

Duties

Direct participation in fulfilling certain duties is the foundation for fully exercising one's rights. Diligently observing your duties means respecting the community and the healthcare services available to all citizens.

› COLLABORATION

the patient commits to expressing their wishes regarding individuals authorized to receive information about their health status upon admission (using the specific form they'll be asked to sign). They also commit to offering maximum cooperation to the healthcare providers and promptly reporting any environmental, social, or personal situation that could be considered a risk to individual or collective health. The patient is required to regularly countersign the record of interventions performed at home.

› INFORMATION

patients must inform doctors and healthcare personnel of everything that may be useful and necessary for better prevention, diagnosis, therapy, and care. The patient has a duty to promptly inform about their intention to decline scheduled treatments and services, to avoid wasting time and resources.

› RESPEC

the patient must behave respectfully towards the personal and professional dignity of healthcare providers, avoiding verbal and physical aggression against a healthcare professional in the workplace. The patient commits to respecting the rules that ensure the proper conduct of care and therapeutic activities.

USEFUL INFORMATION

The following contacts are available for:

- › The Patient and their family members or caregivers
- › The General Practitioner or Primary Care Pediatrician
- › The Continuity of Care Doctor (also known as the "On-Call Doctor" or "Medical Guard")
- › The Referral Hospital Center
- › Social Service

OPERATIONS CENTRES – KEY NUMBERS

Home-Care Ops Centre Napoli 1

Via G. Porzio – Centro Direzionale Isola A7, 80100 Naples

Home-Care Ops Centre Napoli 2

Via G. Garibaldi 42-46, 80100 Naples

Home-Care Ops Centre Napoli 3

Via Recanati 27, 80046 San Giorgio a Cremano – Tel. 081 3778726 – adinapoli3@osa.coop

Home-Care Ops Centre Salerno

Via Piave 49, 84083 Castel San Giorgio (SA)

TEL. 081-2773577

Dedicated complaints mailbox:
reclami@osa.coop

Medical Director: Dr Nicola Silvestri

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OSA

OPERATORI SANITARI ASSOCIATI SOC. COOP.

Via Lucio Volumnio, 1 · 00178 · Roma

Codice Fiscale 07056830586

P. IVA 01675771008

www.osa.coop



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