



SERVICE CHARTER



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1. GENERALITY

This health services charter is, first of all, a presentation of our clinic, with its characteristics, its activities, the services and services it is able to provide. This is not a presentation that is intended as an end in itself, but rather as a moment of welcome and mutual understanding with all those who turn to our clinic, confident that they will find help in the difficulties they are afflicted by.

*Who comes to the center **FISIOMED SRL** he must overcome any sensation of strangeness, of awe in the face of an unknown environment and immediately feel surrounded by a spirit of affectionate hospitality and human warmth. He will thus be able to obtain the most appropriate and adequate services for his situation, feel involved in what is done towards him, and have a better awareness of his rights. You will also be able to contribute, through your reports and, when necessary, your fair complaints, to fill the deficiencies that will inevitably occur and enable our clinic to provide an increasingly qualified service that responds to everyone's needs.*

The service charter is:

- a fulfillment based on a series of rules and therefore mandatory;*
- one of the requirements for accreditation;*
- a soft quality approach tool, in which a particular procedure is proposed for the identification of dimensions, factors, indicators and quality standards;*
- a dynamic tool, subject to continuous checks and integrations;*
- a tool available in the clinic containing information on the routes to be followed by the user to take advantage of the services provided.*

However, this is not a protection intended as a mere formal recognition of the citizen's guarantees, but the attribution to the citizen of a power of direct control over the quality of the services provided.

The service charter therefore assigns a strong role both to service providers and to citizens in orienting the activities of services towards their task: providing a good quality service to citizen-users.

The Charter also provides for the methods through which the citizens themselves can easily access the complaint procedures regarding the violation of the principles established by them.

2. REGULATORY SOURCES

The fundamental reference standards for the "service charter" are: **the directive of the President of the Council of Ministers of 27 January 1994**, bearing *"Principles on the provision of public services"* -which are in this context defined as *"aimed at guaranteeing the enjoyment of the rights of the person, constitutionally protected, first of all, health, even when these services are "carried out under concession or by agreement"*; **The Prime Ministerial Decree of 19 May 1995**, concerning the *"General reference scheme of the public health services charter"*; provision in which it is reiterated that this obligation must be complied with by *"entities providing public health services also under concession or by agreement"* -and that such subjects are required to give *"adequate advertising to users of their "card"*; **the guidelines of the Ministry of Health (SCPS) N. 2/95** relative all *"Implementation of the service charter in the national health service"*, guidance document in which the guiding principles of the "charter" are reiterated and suggestions for structure and content are illustrated.



3. THE FUNDAMENTAL PRINCIPLES OF THE SERVICE CHARTER

Law 502/92 which reorganized *Healthcare*, has with article 14 "**citizen's rights**" introduced a series of tools aimed at guaranteeing good quality of care. In particular, we tried to introduce a series of -"*indicators*"-relating to *personalization, humanization, information, comfort and prevention* to evaluate the quality of the services provided. The indicators that fall within the scope of Article 14 of 502/92 "*citizens' rights*" they concern the point of view and expectations of citizens. They can be defined as indicators of the degree of user satisfaction and can be linked to adequacy, accessibility, fairness, the operator/patient relationship, "*humanization*", to comfort, to privacy. This type of attitude concerned not only healthcare but all aspects of public services. All this resulted in the publication of a "guidance" document. The reference document is "*The Charter of Public Health Services*" prepared by the Department of Public Function, in agreement with the Ministry of Health and published with Decree of the President of the Council of Ministers of 19 May 1995 in the Official Gazette of the Republic n°125 of 05.31.1995. The Charter is essentially aimed at protecting user rights.

THE PROVISION OF SERVICES TAKES PLACE IN COMPLIANCE WITH THE FOLLOWING FUNDAMENTAL PRINCIPLES:

- **EQUALITY**: the services are provided without distinction of sex, race, language, social class, religion and political opinions
- **IMPARTIALITY**: services are provided through objective, fair, transparent and impartial behaviour
- **CONTINUITY**: the clinic guarantees the implementation of the program continuously and without interruptions within the operating methods defined by national and regional rules and regulations
- **RIGHT TO CHOICE**: the clinic guarantees the citizen user the right, according to current regulations, to choose among the subjects who provide the service.
- **APPROPRIATENESS**: services are "appropriate" when they are at the same time relevant to people, circumstances and places, valid from a technical-scientific point of view and acceptable to both customers and operators
- **PARTICIPATION**: The clinic guarantees citizen users the right to present complaints, requests, observations, to access information and to make suggestions to improve the service.
- **EFFICIENCY AND EFFECTIVENESS**: The clinic guarantees that the services and performances will be provided through optimal use of resources, according to the most up-to-date quality standards, and by adopting all appropriate measures to satisfy the needs of the citizen user as promptly as possible, avoiding expenditure that would be detrimental to the community
- **EQUALITY OF RIGHTS**: the services are provided according to the same rules for everyone, furthermore the right to difference must be guaranteed, removing any possible cause of discrimination and promoting treatments that
- **RESPECT FOR DIGNITY AND CONFIDENTIALITY RIGHTS**: Every citizen user must be assisted and treated with care, courtesy and attention while respecting the person and their dignity.

3.1 PUBLICATION OF THE SERVICE CHARTER

The structure undertakes to make the service charter available to its customers at its headquarters.



4. DEFINITIONS

- **MISSION** The reason for being of the Structure
- **VISION** The challenging horizons that the Structure aims to achieve both in terms of its own evolution and the quality of the performances and services provided
- **GENERAL OBJECTIVES** Long-term objectives
- **SPECIFIC OBJECTIVES** Objectives focused on the medium and short term

5. POLITICS

5.1 MANAGEMENT STATEMENT

The **FISIOMED SRL** specialist offers its patients:

- a structure used for physical medicine, rehabilitation, recovery, functional re-education, orthopaedics, physiatry, cardiology, neurology, forensic medicine, ENT, urology, psychology, dietetics and level 1 sports medicine;
- specialized skills and technologically adequate equipment;
- ultrasound aid for orthopedic and cardiological specialist visits to perform ultrasound and color Doppler ultrasound respectively;
- through external collaborations, the center offers the possibility of carrying out baropodometric tests, insoles and bites, unconventional therapies: oxygen-ozone therapy (excluding intradiscal), mesotherapy, hyaluronic acid infiltrations.
- a management system that allows the quality of the service to be monitored and improved, but above all the desire to offer patients a reference structure that offers a global service for all its specialties.

5.2 MISSION

The mission of the center **FISIOMED SRL** is to ensure that the high quality of the professionals and technologies present in the clinic are always aimed at creating a global, excellent and timely public service in the field of physical medicine, rehabilitation, recovery, functional re-education, orthopaedics, physiatry, cardiology, neurology, forensic medicine, ENT, urology, psychology, dietetics, psychomotricity and level 1 sports medicine, strongly oriented towards the user and respectful of all their needs.

The **FISIOMED SRL** was created by meticulously respecting all existing legislation to achieve institutional accreditation and subsequently the agreement over time.

5.3 VISION

The Management undertakes to:

- Constantly pursue the best efficiency, effectiveness and timeliness of the services provided;
- Promote the personal and professional development of the members of the structure through internal communication and training;
- Optimize the ability to manage the relationship with the customer/patient, increasing their level of satisfaction and identifying their expressed and implicit needs;
- Make the sources of error transparent, to prevent their onset, and identify all possible critical issues and the related possible improvement interventions;
- Develop all efforts necessary to achieve the set objectives;
- All functions that hold roles of responsibility within the Structure, participating directly or indirectly in its results, contribute to the implementation of this policy.

The Structure Management, on the basis of its Mission and the directions defined in the Vision, has defined objectives (general and specific) which it undertakes to pursue with the full collaboration of all human resources.



5.4 GENERAL OBJECTIVES

The general objectives of the Structure are the following:

- Constantly seek harmony and effective communication within the Structure
- Increase professionalism with respect to the types of services that are mostly provided
- Obtain a general improvement in the Structure's communication with the outside world
- Increase services and performance for an increasingly global service
- Increase the number of patients

5.5 SPECIFIC OBJECTIVES

The specific objectives of the Structure are the following:

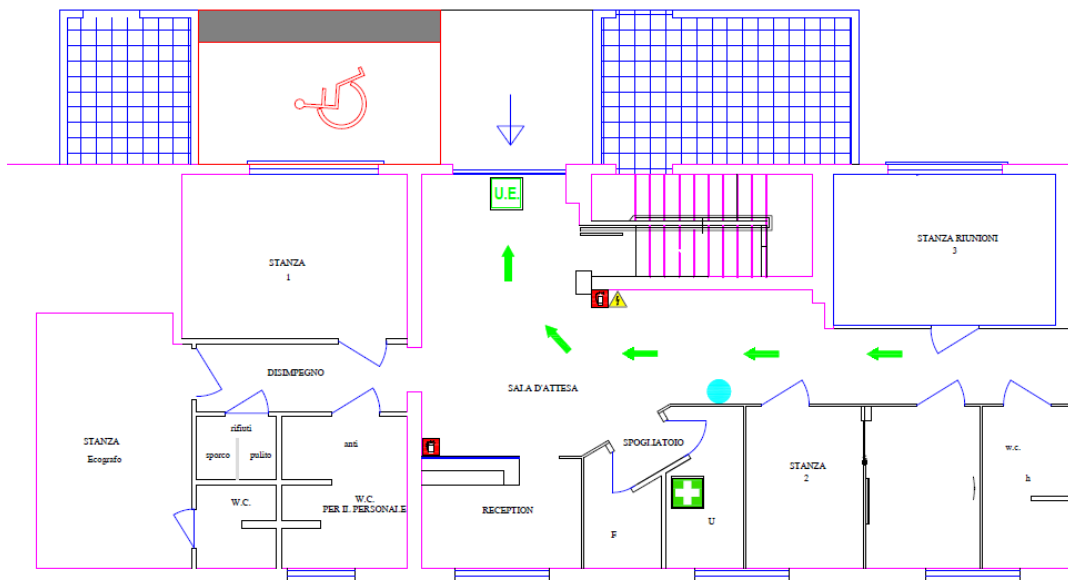
- Hold a meeting with all collaborators every six months to keep communication regarding the profession alive and effective, and evaluate the various opportunities for improving the service offered.
- Maintain constant training through consultation and development of scientific material, participation in courses and updates.
- Require doctors and collaborators to undergo at least a refresher course once every year in order to obtain the right training credit score according to the law.
- Purchase specific material for the re-educational gym
- Periodic checks on systems and equipment

6. STRUCTURE AND ORGANIZATION OF THE FISIOMED SRL CENTRE:

6.1 COMPOSITION OF THE OUTPATIENT CENTER:

- 1 reception_
- 2 waiting room,
- 1 archive office
- 7 clinics for specialist doctors, 2
- neuropsychomotor clinics,
- 1 gym for neuropsychomotor rehabilitation,
- Locker rooms

MEZZANINE



BASEMENT





6.2 OPENING TIME

From Monday to Friday from 9:00 to 18:00

On Saturday from 9:00 to 13:00

Useful telephone numbers

Switchboard: +39 0773

904549

Email: fisiomed.09@gmail.com

Website:

www.fisiomedpriverno.it

6.3 SECRETARIAT SERVICE

The secretarial service is available to users for telephone reservations and for information regarding methods of access to the Facility, the services, their overall cost and times.

There is no access priority, user requests are all treated as emergencies. The accounting service is also carried out at the reception.

6.3.1 RIGHT TO PRIVACY

The patient reads and signs the consent form for the processing of personal data, pursuant to law 196/03. The user's personal file is stored in a protected area available only to the competent doctor or therapist, to guarantee confidentiality.

For minors, the signature and document of one of the parents/guardians is required.



6.3.2 INFORMATION CONSENT

Each patient who must undergo therapeutic treatment is informed about the methods of intervention and declares his or her consent in writing by filling out a form.

6.3.3 WAITING TIME

Waiting times for reservations: approximately 5 minutes
Waiting times for acceptance:
approximately 5 minutes
Waiting times for specialist visits: max 20 days

6.3.4 PAYMENT OF BENEFITS

The services are paid in advance at the time of booking unless special agreements are made with the Management



7. ORGANIZATION CHART OF THE FISIOMED SRL CENTRE:

Attorney

Antonella D'Alessio

Healthcare Director - Specialist doctor

Dr. Franco Stirpe

Pediatrics

Specialist doctors responsible for Branca:

Dr. Alberto Scarchilli

Orthopedics and traumatology

Dr. Luca Pazzaglia

Orthopedics and traumatology

Dr. Pietro Giacomo Curatolo

Sports medicine

Dr. Maurizio Neri

Cardiology

Dr. Alfredo CaradonnaCardiology

Dr. Tonino Proia

Angiology and Vascular surgery

Dr. Claudio Di Emma

Urology

Dr. Fabio Lucchese

Ophthalmology

Dr. Salvatore Corso

Ophthalmology

Dr. Renato Conti

Neurosurgery and Neurology

Dr. Valerio Giangrande

Otolaryngology

Dr. Filippo Zaccheo

Gynecology

Dott.ssa Marina De Cupis

Gynecology

Dr. Pietro Falco

Hematology

Dr. Giusy Pantaneschi

Psychology

Dr. Sonia Antonaci

Psychology

Dr. Marica Cellini

Psychology

Dr. Simona Scaccia

Psychology

Dr. Ilaria Morea

Psychology

Dr. Martina Benedetti

Psychology

Dr. Dorina Risi

Aesthetic Medical Nutritionist



Dott.ssa Maria Carla De Angelis	Dermatology
Alessandra Pelagalli	Dietician
Dr. Surprised Fabiola	Neurology
Dott. Fertilizer Targa	Surgery and Gastroenterology
Dr. Alba Sunshine Bettoschi	Child neuropsychiatry
Dr. Stefania Ciotti	Neuropsychomotricity of developmental age
Dr. Marianna Pagliaroli	Neuropsychomotricity of developmental age
Dott.ssa Claudia Marsella	Neuropsychomotricity of developmental age
Dr. Alessio Aronne	Neuropsychomotricity of developmental age
Dr. Alba Cicerano	Logopedia
Dr. Chiara Ardia	Logopedia
Dr. Alessia Gravante	Logopedia
Dr. Ignazio Bernasconi.....	Osteopath
Dr. Alessio Madonna	Aba Supervisor
Dr. Stefano Moontanari	Pneumology
Dr. Manfredi Grande	Sonographer
Dr. Leandro Lombardi	Radiology
Dr. Emanuele Piccione	Radiology
Augusta Olivieri	Radiologist Technician
Dr. Giuseppe Di Crosta	Urology
Dr. Cinzia De Prosperis	Rheumatology
Enrico De Angelis	Chiropody
Dr. Angela Carlone	Endocrinology
Dr. Nazareno Di Macio	Forensic Medicine
Dr. Valerio Colasanti	Forensic Medicine



8. FUNCTIONS CHART OF THE FISIOMED SRL CENTRE

Antonella D'Alessio

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Dott.ssa Maria Carla De Angelis

Head of Dermatology

Dr. Salvatore Corso

Head of Ophthalmology

Dr. Tonino Proia

Head of Angiology

Dr. Emanuele Piccione

Head of Radiology and Ultrasound

Avv. Giovanni Martellucci

Legal contact

Dr. Fabrizio Damiani Budget and

accounting manager

Dr. Marco Rossi

Responsible for prevention and protection



9. THE SERVICES PROVIDED BY FISIOMED SRL

There is no access priority, but users' pathologies are all treated as urgent.

Medical services:

Specialistic examinations:

Orthopedic visit

Cardiology visit

Neurological

examination

Neurosurgical visit

ENT visit Psychological

visit

Eye examination

Angiological examination with venous and arterial Doppler

Dermatological

examination

Gynecological and breast examination

Rheumatology visit

Surgical visit

Endocrinological visit

Dietetic visit.

Urological visit

Competitive sports medical examination

Competitive sports medical examination over 35

Legal and Labor medical examination

Radiological exams

Ultrasound is Doppler

Outpatient Surgery

Non-conventional medicine:

Analgesic-orthopaedic-traumatological therapies:

Mesotherapy

Hyaluronic acid infiltrations

Neuropsychomotor performance

Motor disorders

Neurodevelopmental disorders

Hyperactivity disorder or attention deficit disorder

Communication disorder(include disorders of phonetic-phonological language, social communication and fluency)

Movement disorder

Specific learning disorder(dyslexia, dysorthography, dysgraphia and dyscalculia)

10. THE WORK PROCESS

To better guarantee the effectiveness of the rehabilitation-re-education intervention, the Clinic prefigures the objectives and implementation times within a work process that pursues a positive outcome.

It should be underlined that patients who have even temporary fragility are followed individually.

11. QUALITY STANDARDS THAT THE CENTER IS COMMITTED TO GUARANTEE

PROCESS	PARAMETER	STANDARD	INDICATOR	EXPECTED VALUE
relational	Hospitality	presence constant Of of operator s	N° di operator s proportionate to the volume and/or user requests	Level of satisfaction with questionnaires >=good equal to 80% of returned questionnaires
relational	Access	Short waiting times	Waiting time less than 10 minutes	Level of satisfaction with questionnaires >=good equal to 80% of returned questionnaires
relational	Global takeover	programs that are individualized and consistent with the person's real needs	evaluation of the quality of treatment	Level of satisfaction with questionnaires >=good equal to 80% of returned questionnaires
relational	Continuity of care	presence of an internal system Of , interchangeability, comparison between operators, implementation of periodic (monthly) planning and verification meetings with the people involved	N° meetin gs held/number scheduled per patient	n° matches non lower than n° 1
relational	Participation/ coinvolgimento	submit complaints, requests, observations, access information and make suggestions to improve the service	Number of complaints received/number of accesses	Expected value of complaints < 10% of the total number of accesses.
professional	Update	programming a nd periodic implementation of operator training	N° meetin gs held/number scheduled	n° matches non lower than n° 2



12. VERIFICATION OF COMMITMENTS AND ORGANIZATIONAL ADAPTATION:

12.1 REPORT ON THE STATE OF STANDARDS

The FISIOMED SRL center guarantees the verification of the implementation of the standards through an annual report on the results achieved.

The Center recognizes as its priority commitment the constant verification of the adequacy of the services offered and the improvement of their quality standards, for this purpose it also makes use of the collaboration of the Users of its services.

12.2 PATIENT SATISFACTION SURVEY

The FISIOMED SRL center guarantees the carrying out of surveys on the degree of patient satisfaction, promoting the distribution of questionnaires, sample surveys and direct observation.

With a view to continuous improvement, the FISIOMED SRL center has activated the best internal organizational procedures and operational instructions to describe the activities carried out within the structure, this process is aimed at setting quality standards for carrying out the activities in a controlled manner .

See Attachment 2: service evaluation questionnaire



Attachment 2

Evaluation questionnaire

Your stay at our Center has ended.

In wishing you good health, we ask for your collaboration in completing this questionnaire to evaluate our service.

We invite you to express your opinion with all sincerity: everything you tell us will serve to try to increasingly improve the services available to our customers.

The questionnaire is anonymous and can be placed in the box placed at the exit.

Male Female age _____ profession _____

How did you find out about our centre?

Doctor/ Specialists newspapers/specialist magazines Internet Other _____

How do you rate the hygiene of our environments?

insufficient(s). sufficient good excellent(s).

Notes and advice: _____

The tranquility and comfort at our facility are judged by:

insufficient(s). sufficient good excellent(s).

Notes and advice: _____

The courtesy and efficiency of the secretarial staff are:

insufficient(s). sufficient good excellent(s).

Notes and advice: _____

How do you rate the flexibility in changing the appointment?

insufficient(s). sufficient good excellent(s).

Notes and advice: _____

Punctuality of performance is considered:

insufficient(s). sufficient good excellent(s).

Notes and advice: _____

How do you rate the accuracy of medical examinations and services?

insufficient(s). sufficient good excellent(s).

Notes and advice: _____

The availability of the Specialist Doctors/physiotherapists in providing information results in:

insufficient(s). sufficient good excellent(s).

Notes and advice: _____

How do you rate the level of human relationships and communication of medical specialists/physiotherapists?

insufficient(s). sufficient good excellent(s).

Notes and advice: _____

	Reception of sessions	Quality of the treatment	Time of waiting	Human relations/ level of communication
Treatment Physiotherapy	<input type="checkbox"/> insufficient(s). <input type="checkbox"/> sufficient <input type="checkbox"/> good <input type="checkbox"/> excellent(s).	<input type="checkbox"/> insufficient(s). <input type="checkbox"/> sufficient <input type="checkbox"/> good <input type="checkbox"/> excellent(s).	<input type="checkbox"/> insufficient(s). <input type="checkbox"/> sufficient <input type="checkbox"/> good <input type="checkbox"/> excellent(s).	<input type="checkbox"/> insufficient(s). <input type="checkbox"/> sufficient <input type="checkbox"/> good <input type="checkbox"/> excellent(s).
Treatment Massage therapy	<input type="checkbox"/> insufficient(s). <input type="checkbox"/> sufficient <input type="checkbox"/> good <input type="checkbox"/> excellent(s).	<input type="checkbox"/> insufficient(s). <input type="checkbox"/> sufficient <input type="checkbox"/> good <input type="checkbox"/> excellent(s).	<input type="checkbox"/> insufficient(s). <input type="checkbox"/> sufficient <input type="checkbox"/> good <input type="checkbox"/> excellent(s).	<input type="checkbox"/> insufficient(s). <input type="checkbox"/> sufficient <input type="checkbox"/> good <input type="checkbox"/> excellent(s).
Treatment Chinesiologico	<input type="checkbox"/> insufficient(s). <input type="checkbox"/> sufficient <input type="checkbox"/> good <input type="checkbox"/> excellent(s).	<input type="checkbox"/> insufficient(s). <input type="checkbox"/> sufficient <input type="checkbox"/> good <input type="checkbox"/> excellent(s).	<input type="checkbox"/> insufficient(s). <input type="checkbox"/> sufficient <input type="checkbox"/> good <input type="checkbox"/> excellent(s).	<input type="checkbox"/> insufficient(s). <input type="checkbox"/> sufficient <input type="checkbox"/> good <input type="checkbox"/> excellent(s).

The secretariat:

Disponibility to supply information	Courtesy	Timetables Of opening	Time Of wait	Human relations/ level of communication	Possibility Of claim
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Notes and advice: _____

<input type="checkbox"/> insufficient(s). <input type="checkbox"/> sufficient <input type="checkbox"/> good <input type="checkbox"/> excellent(s).	<input type="checkbox"/> insufficient(s). <input type="checkbox"/> sufficient <input type="checkbox"/> good <input type="checkbox"/> excellent(s).	<input type="checkbox"/> insufficient(s). <input type="checkbox"/> sufficient <input type="checkbox"/> good <input type="checkbox"/> excellent(s).	<input type="checkbox"/> insufficient(s). <input type="checkbox"/> sufficient <input type="checkbox"/> good <input type="checkbox"/> excellent(s).	<input type="checkbox"/> insufficient(s). <input type="checkbox"/> sufficient <input type="checkbox"/> good <input type="checkbox"/> excellent(s).	<input type="checkbox"/> insufficient(s). <input type="checkbox"/> sufficient <input type="checkbox"/> good <input type="checkbox"/> excellent(s).
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Notes and advice: _____



12.3 COMPLAINTS

The **FISIOMED SRL** guarantees the protection function towards the citizen also through the possibility for the latter to lodge a complaint following a disservice, act or behavior that has denied or limited the usability of the services.

12.4 OFFICE IN CHARGE

Complaints are submitted to the secretariat during opening hours. The operator receives observations, oppositions or complaints in any form presented by users and/or recognized associations or bodies representing them. The contact person for complaints is the management of the facility which undertakes to communicate to the customer that the complaint has been acknowledged within 24 hours and to resolve the disservice in the shortest technical time possible.

12.5 HOW TO SUBMIT A COMPLAINT

The user can lodge a complaint by appearing directly at the secretariat, providing his/her observations orally, or by filling out the appropriate form distributed there and delivering the completed form to the reception desk.



COMPLAINT FORM

Consiglio dei Ministri del 27 gennaio 1994

Gentile Signora, egregio Signore,
se ritiene che il gm poliambulatorio specialistico non abbia rispettato i principi previsti dalla Direttiva del Presidente del Consiglio dei Ministri del 27 gennaio 1994, La invitiamo a compilare e riconsegnare il presente modulo che rappresenta uno strumento per tutelare i Suoi diritti e dare un contributo di idee per il miglioramento della qualità del servizio.

La informiamo che la segnalazione non può essere presentata in forma anonima.

Se lo desidera, potrà avvalersi dell'aiuto del personale per la sua compilazione.

La presentazione del modulo impegna il gm poliambulatorio specialistico a:

- Rilasciare immediatamente una ricevuta con l'indicazione del numero di protocollo e l'individuazione del responsabile degli accertamenti;
- inviare, non oltre il ventesimo giorno, una prima comunicazione sullo stato degli accertamenti;
- effettuare entro 30 giorni la comunicazione finale sull'esito di tali accertamenti, sui provvedimenti eventualmente adottati o da adottare, nonché sulle ulteriori azioni possibili in caso di risposta negativa.

La informiamo inoltre che la presentazione del reclamo non sostituisce in alcun modo i ricorsi amministrativi e giurisdizionali previsti dell'ordinamento giuridico, né sospende i termini degli stessi.

Grazie per la collaborazione.

IL DIRETTORE SANITARIO



MODULO RECLAMO UTENTE

Ricevuto a mezzo: telefono di persona altro _____

SEZ.1 ORIGINE E DESCRIZIONE DEL RECLAMO

Cognome e nome _____

indirizzo _____ telefono _____

Descrizione del reclamo _____

Firma utente _____ Firma responsabile _____

A norma della legge 675/96, art.13 e successivi, si dichiara che la raccolta dei dati ha lo scopo di fornire informazioni statistiche di qualità del servizio

SEZ. 2 ANALISI DEL RECLAMO E AZIONI CORRETTIVE (riservato alla direzione)

Possibili cause _____

Azioni Correttive _____

data prevista per la verifica _____ Firma responsabile _____

SEZ. 3 VERIFICA

Attuazione: positiva negativa data _____ firma _____

Efficacia: positiva negativa data _____ firma _____

notifica all'utente in data _____ a mezzo: _____



13. SMOKE

Smoking is prohibited in the Center, in accordance with the provisions of Law n.584/75 as well as the P.C.M. Directive. of the 14.12.95 and by art.52 -co.20- of Law n.448/2001.

14. CLEANING

The FISIOMED SRL center guarantees cleaning and sanitization according to regulations.

The patient is required to observe the most common hygiene rules.