

SERVICES CHARTER

STUDIO MEDICO RUTIGLIANI

2023

REVISION LIST

DATA	REV.	SUBJECT OF THE MODIFICATION
04/01/2023	00	First issue
22/02/2023	01	Documentary update

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Document drawn up in compliance with the Prime Ministerial Decree. n. 6 of 19 May 1995 "General reference scheme of the Charter of Public Health Services"; to Resolution No. 369 of 03.23.2010 "Guidelines for the Charter of Public Health Services; to Law 328/2000 "Framework law for the creation of the integrated system of interventions and social services art. 13 (Charter of social services); to the Guidelines of the Ministry of Health of 2/95.

1. WHO WE ARE

The Rutigliani srls medical practice is located in via Vitruvio n°430 Formia.

The practice was born from the idea of dental doctors with twenty years of experience and already owners of practices to offer the best possible quality of dental services and the most effective and innovative clinical solutions for any need and spending capacity, combining their ultra-specialist skills.

The meaning of the word Dentist derives from the Greek Odontos (tooth), iatros (doctor), a term that we recognize in semantics and substance, however the synonym of "dentist" still resists, but is less appropriate.

The mouth must only be examined by a doctor, in fact collaboration between dentists and other specialists is essential in the field of prevention: the mouth can represent the first alarm bell for complex systemic pathologies (cardiovascular, dyslipidemia, postural, diabetic, oncology etc.).

2. OUR OBJECTIVES

The Rutigliani srls Medical Practice, starting from the month of January 2023, by will of the Management has undertaken the path towards the "World of Quality" by deciding to adopt an organizational and management model in compliance with the UNI EN ISO 9001 standard (2015 Edition) which establishes the criteria for the correct carrying out of all company activities and the regulation published on DCA n° 469 n° 2017.

The Management, aware for some time that it operates in a field in which, on the one hand, the patient's needs are particularly important and critical and, on the other, the specific reference regulations and the consequent need for adaptation have evolved, has decided to establish a Quality System with the firm belief that the objectives to be achieved are:

- full satisfaction of the patient's needs and expectations
- the continuous improvement of the service
- efficiency in providing the service

The achievement of these objectives must be pursued by managing change with flexibility, timeliness and determination, making the best use of available organizational tools, improving one's professionalism in relation to individual work techniques (activity planning, staff training, time management and of work priorities), developing the ability to work together with others; Constantly adapting to the mandatory and contractual requirements.

The needs and expectations of the Patient must be satisfied through maximum commitment in the activities of carrying out the service.

All the professional figures forming part of the structure, regardless of the specific responsibilities assigned, are crucial for achieving patient satisfaction.

The application of the Quality System therefore involves all functions and requires the participation, commitment and effective interaction of all staff.

The Management undertakes to implement and support the Quality policy set out above, to disseminate it and verify it periodically, also taking into consideration the needs and proposals of all staff.

3. FUNDAMENTAL PRINCIPLES

The Centre, in carrying out its activities, is inspired by the fundamental principles expressed in the Prime Ministerial Decree of 01/27/94 and set out in this Service Charter.

These principles are:

RESPECT FOR THE USER - in his value as a Person and Citizen. This represents the criterion that informs the behaviors and attitudes of the staff who work within the CENTRE.

PRIVACY - Respect for privacy and human dignity. The Citizen User who turns to the CENTER is provided with information on his state of health, guaranteeing maximum confidentiality in accordance with the provisions of current legislation on privacy.

EQUALITY - The rules regarding the relationship between the User and the CENTER must be the same for everyone. No distinction in the provision of services can be made for reasons related to sex, race, language, religion or political opinions.

This principle establishes not only the right to uniformity of services but also the prohibition of any discrimination in the provision of services.

Every citizen has the right to be assisted with attention and concern while respecting human dignity. Every citizen has the right to be treated with courtesy, humanity, without arrogance or excessive confidence.

IMPARTIALITY The service providers have the obligation to base their behavior towards users on criteria of objectivity, justice and impartiality. The individual clauses of the general and specific conditions of service provision and the sector regulatory rules are interpreted according to this obligation.

CONTINUITY The provision of public services, within the modalities established by the sector regulatory legislation, must be continuous, regular and without interruptions. Cases of irregular operation or interruption of service must be expressly regulated by sector regulations. In such cases, the providers must adopt measures aimed at causing the least possible inconvenience to users.

RIGHT TO CHOICE Where permitted by current legislation, the user has the right to choose between the subjects who provide the service. The right to choose concerns, in particular, services distributed across the territory.

PARTICIPATION - Understood not only as the Citizen's right to access documentation, pursuant to law 241/1990, but also as information and humanization of the service as well as protection of the Patient. Each Citizen User has the right to obtain from the CENTER staff all information relating to the services provided and the methods of access, in relation to their request for healthcare services.

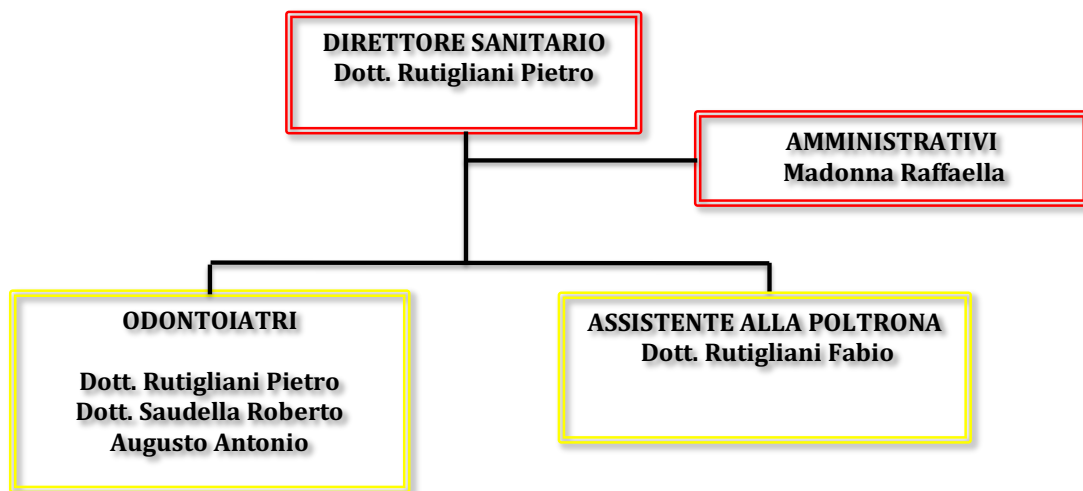
The Citizen User has the right to obtain complete and comprehensible information from healthcare personnel regarding the diagnosis and any proposed therapy. The Citizen User also has the right to be informed about the possibility of alternative investigations and treatments, which can be carried out in other structures.


The user can produce memories and documents, make observations, make suggestions for improving the service. The providers give immediate feedback to the user regarding the reports and proposals formulated by them. The providers periodically acquire the user's assessment of the quality of the service provided.

EFFICIENCY and EFFECTIVENESS - Understood as the CENTER's constant commitment to orienting the strategies and efforts of its organization towards achieving ever better effectiveness of the healthcare service provided.


4. ORGANIZATION CHART



The Center defines the responsibilities and tasks of each professional figure.

**ORGANIGRAMMA
STUDIO ODONTOIATRICO RUTIGLIANI PIETRO****5. INFORMATION AND TIMES**

 Visiting hours **Monday – Wednesday – Thursday – Friday – Saturday** from **09:00** to **13:00** and from **16:00** to **19:30** **Tuesday** **09:00 – 19:30**.


 Address via Vitruvio n°430, Formia

 **0771061581**

 **3509669143**  Whatsapp **3509669143**

 Facebook: <https://www.facebook.com/people/Dentista-FormiaMed/100076190883195/>

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 formiamed@gmail.com

6. WAITING TIMES AND ACCESS METHODS

6.1 DENTAL SERVICES

Dental services require a reservation which can be made during opening hours directly at the facility or by calling. This reservation does not give the right to priority entry but is aimed at the exclusive communication of the days and times in which these exams are carried out.

The order of entry will be established based on the order of arrival at the facility and entries will be accepted up to a predetermined maximum.

6.2 TYPE OF SERVICES

- Prosthetics
- Implantology
- Orthodontics
- Endodontics
- Surgery
- Aesthetics
- Periodontology
- Conservative
- Computer Assisted Occlusion
- Digital Radiology

6.3 PREVENTION

The cornerstone of prevention is correct oral hygiene and is the best tool for preventing tooth decay and lesions of the oral cavity.

Teeth cleaning occurs by brushing them. Teeth should be cleaned well in front, behind and in the spaces between teeth because bacterial plaque nests on all surfaces. Moving the toothbrush horizontally does not give a thorough cleaning, it is preferable to make it make a vertical movement, always starting from the gum and going towards the tooth, never vice versa. Both the internal and external surfaces of the tooth are cleaned with a rotating movement directed outwards. Toothpaste facilitates the removal of bacterial plaque and provides antiseptic and healing substances. Dental floss is a very effective tool for removing interdental and subpapillary bacterial plaque. It must be passed around the teeth, scraping the plaque. Clean segments of wire must be used for each application. If bleeding occurs it is due to the presence of plaque or tartar under the gum.

There is a correlation between the incidence of tooth decay and the consumption of carbohydrates (glucides). They provide the fermentable substrate for cariogenic bacteria. The cariogenic effect of carbohydrates can be modified by the presence of other nutrients which, such as calcium, phosphorus and fluoride, have protective effects. Harmful factors:

fermentable carbohydrates (glucides), foods with high acidity (citrus fruits, carbonated drinks, etc.). Protective factors: non-fermentable compounds (proteins, lipids, minerals) foods rich in calcium, phosphorus and fluoride. The harmful action of carbohydrates is favored by the presence of sugars in the oral cavity, favored by the adhesiveness of some foods to the teeth. After each meal, adequate teeth cleaning must be carried out. Eating out must be limited and the consumption of products with particular adhesiveness to the surface of the teeth, such as sweets, must be reduced. Cleaning the teeth allows you to remove food debris and lower the bacterial load, but if you do not clean the large lingual surface, the bacteria proliferate and in addition to generating smelly compounds, they pass onto the teeth and gums causing tooth decay, periodontitis, plaque and tartar.

7. METHOD OF EXECUTION OF SERVICES

For services under the agreement, access to the facility must be provided with a duly completed referral form from the general practitioner.

At the time of acceptance, the patient is informed, also through posted signs, pursuant to GDPR 679/2016, about the processing of sensitive data. The administrative staff is available for any information relating to the legislative provisions on privacy.

Sensitive data is reported in front office records and is not disclosed. Access to this archive is permitted to the Medical Director and collaborating doctors.

For any inconvenience encountered in the provision of the service, please fill out the complaints and observations form or contact the secretarial staff who will be able to arrange an appointment with the center manager.

The payment of the ticket must be made before performing the services.

Non-exempt citizens are required to pay for specialist medical assistance outpatient treatment according to current rates, up to the amount established by current legislation.

The administrative staff is available for any clarification.

8. QUALITY STANDARDS PROTECTION MECHANISMS AND VERIFICATION OF COMMITMENTS

The Dental Practice has as its primary objective the continuous improvement of the service provided by committing itself to implementing a series of activities suitable to provide a response to the needs expressed by the users of its services.

To this end, it has implemented a quality control system compliant with current regulations, which provides a series of tools suitable for verifying the standards set out in this charter.

Customer satisfaction and therefore perceived quality are monitored using a specific questionnaire. The same module provides users with the tools to formalize any reports of disservices as well as proposals and suggestions for better usability of the services by them.

Complaint Management

The quality of its services, understood as compliance with user expectations, is monitored in real time through careful complaint management.

Pursuant to art. 14 paragraph 5 of the Legislative Decree 502/92 and subsequent amendments, the citizen/user can exercise his right by submitting observations, oppositions or complaints within 15 days, from the moment in which the interested party became aware of the act or behavior against which he wishes to object, in one of the following ways:

- Through the form specially prepared and available at the facility.
- Letter on plain paper, addressed and sent to the Health Directorate.
- Interview with the Health Director

Safety of structures and citizens/users

Safeguarding the safety of citizens/users and the structure is the fundamental premise of the firm's activities.

In order to guarantee that in every aspect of the firm's operations safety is adequately considered as a priority element, a safety plan has been implemented in compliance with Legislative Decree 81/2008, which ensures:

- The continuous improvement of infrastructures and systems
- An adequate training program
- Adequate prevention and alarm systems
- Adequate emergency procedures

Tutte le fasi che il cittadino/utente vive, dall'ingresso fino all'uscita, sono pertanto valutate al fine di ridurre ogni eventuale rischio.

THE COMFORT

Guaranteeing its patients a comfortable stay is one of the objectives that the Center has set itself.

RELATIONAL – BEHAVIORAL ASPECTS

The Firm guarantees its users some basic rules and good relational and behavioral practices of its staff on relational aspects towards them:

- **Recognizability**

that is, the personal identification of all employees through the provision of an identification card (to be worn clearly visible), containing the name and qualification of the collaborator. •

Presentability

Both through the use of decent and clean clothing, and with particular attention to personal care, avoiding forms of carelessness and/or eccentricity.

- **Behaviors, manners and language**

Which must be such as to establish a relationship of trust and collaboration with patients. The language used for information and communications, both written and verbal between the Company and the Patient, must be clear and understandable.

The staff will promptly and willingly deal with any problems that may arise for patients. •

Respect for privacy

Defined by GDPR 679/2016

ATTENTION TO THE ENVIRONMENT

In line with the growing sensitivity to environmental issues, the firm aims to pursue the use of technologies aimed at improving both the environmental impact of the activities connected to the services provided on the community and the safety of patients who use the facility.

9. METHODS OF DETECTION OF STAFF SATISFACTION

In order to be able to understand the needs of the structure's human resources, the Management invites staff to anonymously complete a satisfaction questionnaire. This form is available at reception and is inserted filled in in the appropriate box there. This tool allows the Management to detect the level of satisfaction of the staff relating to the working environment, the structure, the quality of the work carried out and the training courses offered by the organisation. The Management periodically collects the completed questionnaires and analyzes them through the use of statistical techniques. The aim is to

make improvements in all areas of work and, in this regard, the Management periodically organizes meetings with staff to discuss the results emerging from the questionnaires.

10. COLLECTION OF REPORTS AND OBSERVATIONS

The evaluation form of the degree of user satisfaction allows the Center Administration to evaluate the quality of assistance. The aforementioned forms can be requested by patients at Reception, filled in completely voluntarily and then inserted into the appropriate box in Reception. Periodically the Management collects the completed forms and analyzes them through the use of statistical techniques.

Family members or users can forward suggestions or reports to the facility managers, according to their skills, for improving the service provided. The patient or their family members have the right to lodge complaints which must be promptly examined, and be promptly informed of the outcome of the same.

The structure has prepared models for the various reports in its quality system.

The Managers of the areas found to be the subject of the surveys will then be contacted in order to identify Preventive Actions and Corrective Actions aimed at eliminating any causes of Non-Conformity found.

11. RIGHTS AND DUTIES OF PATIENTS

RIGHTS - The patient has the right to be assisted and treated with care and attention, respecting human dignity and his own philosophical and religious beliefs.

The patient has the right to obtain information from the healthcare facility relating to the services it provides, the methods of access and the related skills. The same has the right to be able to immediately identify the staff of the facility who interact in their space or time for their programming.

The patient has the right to obtain complete and comprehensible information from the relevant healthcare personnel regarding the diagnosis of the disease, the proposed therapy and the related prognosis.

Before providing the service, the patient has the right to receive information that allows him to express effectively informed consent; this information must also concern the possible risks or inconveniences resulting from the treatment. Where healthcare personnel reach the

reasoned belief that direct information is inappropriate, it must be provided, unless expressly denied by the patient, to family members or those who exercise guardianship.

All data will be processed in accordance with the provisions of European Regulation n°679/2016. The patient has the right to have sensitive data relating to his illness and any other circumstances that concern him remain secret.

The patient has the right to lodge complaints which must be promptly examined, and to be promptly informed of the outcome of the same.

DUTIES - Permanence within the structure entails compliance with the common rules of behaviour, hygiene and education.

The citizen/user is invited to behave responsibly at all times, respecting and understanding the rights of other users, with the desire to collaborate with the staff of the facility in which they are located.

It is the duty of every citizen/user to promptly inform healthcare professionals of their intention to renounce, according to their will, scheduled healthcare treatments and services so that waste of time and resources can be avoided.

The citizen/user is required to respect the environments, equipment and furnishings found within the healthcare facilities, considering them the same as everyone's assets and therefore also their own.

The citizen/user is required to respect the visit times established by the facility, in order to allow normal healthcare activities to be carried out. In considering being part of a community, it is advisable to avoid any behavior that could create situations of disturbance or discomfort to others.

The organization and times foreseen in the healthcare facility you enter must be respected in all circumstances. The healthcare services requested at different times and in different ways cause a significant disservice for all users.

It is advisable for citizens/users and visitors to move within the structure using the routes reserved for them, directly reaching the locations of their closest interest.

It is the duty of the citizen/user to adapt to the rules and provisions in force in the structure, in order to make the activity of the staff responsible for his care more effective and make his stay more comfortable, together with all those who share his patient experience -user.

The citizen/user has the right to correct information on the organization of the structure, but it is also his precise duty to inform himself at the appropriate times and in the appropriate places.

It is the duty of the citizen/user to respect the smoking ban, governed by a specific law and shared by all operators of the facility.

12. SERVICE LEVELS AND INDICATORS OF THEIR REGULARITY (ADEQUACY)

Remembering that the dimensions relating to technical quality (competence, friendliness, safety, etc.) are excluded, the quality of the healthcare service revolves around the following aspects:

1. aspects linked to time, such as punctuality, regularity (compliance with pre-established and communicated programmes);
2. aspects linked to information relating to healthcare treatment: comprehensibility, clarity, completeness;
3. aspects related to orientation and reception upon entry into the facility, including signage, the necessary general information on services (timetables, names of managers, etc.);
4. aspects related to physical structures: the comfort and cleanliness of the structure, services, waiting rooms;
5. aspects linked to social and human relationships: the personalization and humanisation of treatment, the ability to provide reassurance, respect for privacy, courtesy and respect for dignity, etc.
6. aspects linked to the adequacy of the services provided: by carrying out checks on staff training and equipment maintenance.

13. IMPROVEMENT PROGRAMS

The Management proceeds to monitor:

- customer satisfaction
- quality indicators (divided between customer satisfaction indicators and process indicators).

Quality indicators and standards are set on:

- reception and orientation
- comprehensibility and completeness of information
- accessibility to services and facilities
- regularity, punctuality, timeliness
- protection of rights
- humanization and valorization of social and human relationships

- personalization and confidentiality
- participation
- comfort

From the analysis and processing of the data thus obtained, useful information can be extrapolated in order to be able to make related decisions and/or actions:

to the improvement of the quality management system and its processes;

a) the improvement of the service provided in relation to the customer's requirements

b) resource needs

Monitoring and measuring user satisfaction is based on the review of customer information. The collection of this information is active (questionnaires and surveys, sector studies) and/or passive (complaints).

COMPLAINT REPORT

N° Reclamo:

Reason for complaint					
Complainant					
Surname		First name			
Address					
C.A.P.		City		Prov.	
Complaint form filler: customer <input type="checkbox"/> operator <input type="checkbox"/>					
Data:		Signature:			
a) Communication to the customer - Rif. N.C. n°					
Actions taken in response to the complaint:					
Area reserved for the customer					
Data:		Satisfactory response: YES <input type="checkbox"/> NO <input type="checkbox"/>		SIGNATURE:	
b) Communication to the customer - Rif. N.C. n°					
Actions taken in response to the complaint:					
Area reserved for the customer					
Data:		Satisfactory response: YES <input type="checkbox"/> NO <input type="checkbox"/>		Signature:	