MUNICIPALITY OF RECANATI SERVICE CHARTER

HOME CARE SERVICE (SAD)



INTRODUCTION AND PURPOSE

This Service Charter is the instrument through which the Municipality of Recanati ensures transparency, participation, and quality in the delivery of the Home Care Service, in accordance with the principles set out in Legislative Decree No. 36/2023, Legislative Decree No. 33/2013, and the Directive of the President of the Council of Ministers of 27 January 1994 on the “Charter of Public Services.”

The document describes how the service is carried out, the rights of users, the quality standards guaranteed, and the tools available for protection and participation in the Home Care Service.

EQUALITY AND IMPARTIALITY

The Home Care Service for the Elderly (SAD) is provided in accordance with the principles of Equality, Impartiality, and Neutrality, ensuring access to and quality of the service for all users without any distinction or discrimination based on sex, ethnicity, language, religion, political opinion, or personal and social circumstances (Article 3 of the Italian Constitution).

Every beneficiary has the right to receive the same level of attention, safety, and respect from the staff responsible for the Home Care Service for the Elderly.

DESCRIPTION OF THE SERVICE

The Home Care Service comprises a range of social assistance interventions and services provided to elderly persons, adults with disabilities, and, more generally, family units including “fragile” and “vulnerable” individuals at risk of marginalisation. It consists in the provision of social assistance services. The service is carried out at the user’s home, with scheduled visits from Monday to Saturday, between 7:00 a.m. and 8:00 p.m., according to users’ needs, with flexibility in the timing and manner of delivery, in line with schedules tailored to beneficiaries’ requirements.

The Home Care Service is primarily intended for persons in need with reduced personal autonomy and/or self-sufficiency, with limited capacity to manage themselves and their household in daily activities, and who are in a condition of loneliness or isolation.

The service may also be provided to elderly persons or persons with disabilities with reduced self-sufficiency who do not have adequate family support, as well as to family units including individuals at risk of marginalisation or facing emergency difficulties. The primary objective is to enable users to remain safely in their own homes and to provide support and relief to family caregivers.

The principles underlying home care services derive from the experience gained over many years of activity in the social sector, which has made it possible to build a solid tradition of intervention grounded in clear and shared principles.

The management of home care services follows an integrated approach addressing the user as a whole, taking into account all aspects of their circumstances, abilities, potential, difficulties, and resources.

The services that may be provided under the SAD, as also set out in the Municipal SAD Regulation (Municipal Council Resolution No. 19 of 14 April 2011), are as follows:

a) Assistance to support self-sufficiency in daily activities (PERSONAL CARE AND HYGIENE), including: personal hygiene care, dressing, and assistance with meal preparation and/or feeding.

b) Assistance with household management and domestic activities (HOME CARE), including: maintaining hygienic conditions in the home, tidying beds and rooms, changing and washing linen, meal preparation, and assistance in organising household economic activities.

c) Support with administrative matters and promotion of the socialisation of vulnerable individuals (ADMINISTRATIVE ASSISTANCE AND SOCIALISATION), including: accompany to medical appointments; interventions aimed at promoting users' socialisation and social life, such as accompany to and access to services, and participation in local recreational and cultural activities; promotion of socialisation with neighbours and relatives; cooperation with social and health services to provide information on personal rights (welfare, social assistance, health, etc.), and assistance with personal administrative matters; moreover, the purchase of essential goods and other errands.

ACCESS TO THE SERVICE

Persons in particular situations of hardship are entitled to access the Home Care Service, either directly or upon referral by family members, the general practitioner, or the social and health services. In any case, the request for access must be submitted to the Social Services Office directly by the beneficiary and/or by a family member or legal representative (support administrator or guardian).

The application for admission to the service must be completed on the appropriate form, to be submitted to the Social Services Office together with:

- Appropriate medical certification proving the state of health-related hardship and limited autonomy (disability certification, certification under Law No. 104/92 – and any subsequent legislative amendments);
- ISEE declaration for the applicant's family unit and any further documentation attesting to economic hardship, for the purposes of accessing the service and contributing to its cost.

Applications may be submitted throughout the year, as there is no dedicated call for applications. Applications are placed on a waiting list as they are received and assessed according to priority by the social worker, subject to the Municipality available financial resources.

Where the assigned social worker identifies an urgent need for the service in relation to a particular situation of hardship, the service may be activated with priority over the waiting list.

Following assessment by the social worker and acceptance of the request for access, each user is assigned a care operator who is fully briefed on how the service operates. Interventions are planned on the basis of an Individualised Care Plan (PAI), which takes into account the user's specific needs and is drawn up by the social worker responsible for the SAD following a home visit and consultation with the user and their family. The PAI may be amended on the basis of specific input from the assigned operator, the beneficiary, the family member/support administrator/guardian, and the social and health service.

The Plan provides for the promotion of pathways to autonomy for the user and their entire family, taking particular account of difficulties in organising domestic life and, where applicable, difficulties faced by family members; problems of relationship and communication between operator and user, and between operator and family; the fatigue and stress experienced by family members who bear, at least in part, the burden of the daily care of users with significant care needs; and the financial difficulties that may arise from the need to meet demanding and prolonged care commitments.
The number of hours granted is determined on the basis of the type of need identified and, as provided for under Article 12 of the Municipal Regulation, may not exceed 12 hours per week, as specified in the following table:

Type of service requested	Minimum weekly working hours	Maximum weekly working hours eligible for public funding/contribution
Personal care and hygiene	2	6
Home care and hygiene	1	3
Handling of administrative procedures	1	3

As provided for under Article 10 of the Municipal Regulation, beneficiaries are required, in accordance with current legislation, to contribute to the cost of the service according to the financial circumstances of their family unit, based on the income brackets approved annually by the Municipal Executive Board, applying the standardised ISEE assessment criteria set out in Legislative Decree No. 109 of 31 March 1998, as subsequently amended and supplemented, and in any case in accordance with the legislation in force.

Pursuant to Article 11 of the Municipal Regulation, the service may be terminated in the following cases:

a) written request from the user or family member/legal representative;

b) death or permanent admission to a residential facility, where the family no longer requires the service;

c) where the eligibility requirements for the service are no longer met;

d) where there is repeated lack of respect towards service staff;

e) where the user is repeatedly absent during service hours without prior notice to the assigned social worker or home care operator, except for hospital admissions;

f) where the user fails to pay the hourly fee due.

In relation to points d, e, and f, the service will be suspended following formal notice from the provider.

The SAD may be suspended in the event of the user's temporary absence from the Municipality of residence or temporary admission to a hospital, rehabilitation, or residential care facility.

The user, or the person responsible for their care, is required to promptly notify the assigned social worker and/or the staff providing the service.

OPERATIONAL OBJECTIVES

The objectives pursued in the management of Home Care Services are:

- to promote an improvement in quality of life in order to achieve genuine personal and social well-being;
- to prevent and remove situations of need and hardship, enabling users
- to retain their independence in their own home and within their family and social environment, in cases where they are unable to fully care for themselves and cannot rely on adequate support from family members and/or relatives, or find themselves in a state of need that compromises the normal continuation of their family life;
- to avoid hospital admissions and/or admissions to rehabilitation or long-term care facilities, unless strictly necessary due to acute health conditions;

- to promote psycho-physical self-sufficiency and personal autonomy, in order to prevent the chronicisation of situations of complete dependency;
- to promote the recovery of an individual's residual capacities and the maintenance of family relationships;
- to facilitate inclusion and participation in community life, helping to limit and/or eliminate any form of social isolation;
- to promote the autonomy of vulnerable families at risk of marginalisation and/or facing difficult circumstances, and to support the family network in caring for individuals in need, in order to prevent excessive caregiving burdens and the consequent risk of caregiver burnout and requests for institutionalisation of the non-self-sufficient person;
- to support the integration and coordination between social and health services capable of contributing to the autonomy and protection of the individual.

SERVICE STAFF

Staff assigned to the service operate in accordance with this document and with municipal regulations, carrying out the role of home/family care worker, and are identifiable by means of a badge worn and clearly visible at all times during work activities. Operators must: be of legal age, possess specific psycho-physical fitness, demonstrated by medical certificate, enjoy full civil and political rights, have no criminal convictions, hold a category B driving licence, and have appropriate and up-to-date training. The service is provided by qualified staff who meet the following specific requirements:

- Empathy and listening skills: the ability to build a relationship of trust with the elderly person, understanding unexpressed needs and sources of distress.
- Support for socialisation: interventions aimed at psychological well-being and countering social isolation.
- Observation and monitoring: the ability to identify changes in the assisted person's state of health and promptly report any abnormalities.
- Confidentiality and ethics: strict respect for privacy and ethical standards during interventions carried out at the assisted person's home.

SERVICE COORDINATION AND MANAGEMENT

The contracted provider appoints a Service Coordinator as the sole point of contact with the Municipal Administration, as well as with beneficiary users and their families, with the following responsibilities:

- to plan and schedule interventions;
- to promptly replace absent staff, ensuring continuity of the service;
- to verify the regularity of attendance and the correct performance of activities;
- to maintain contact with the Municipal Social Services for the purpose of monitoring the service;
- to submit an annual Activity Report, including performance indicators, critical issues, and proposals for improvement.

QUALITY STANDARDS AND SERVICE LEVELS

QUALITY AREA	GUARANTEED SERVICE LEVEL
Punctuality and continuity of service	Consistent presence of operators
Replacement of absent staff	Prompt replacement in the event of staff absence, within the scheduled start time of the service
Staff conduct and respect towards users	No well-founded complaints regarding improper conduct
Safety and prevention	No incidents attributable to service negligence
Cooperation with family members, legal representatives, general practitioners, and social and health services	Ongoing coordination, effective communication, and no reported service failures

ACCESSIBILITY AND INCLUSION FOR PERSONS WITH DISABILITIES

The Municipality of Recanati ensures that the SAD Service is fully accessible and inclusive.

To this end:

- operators are able to recognise the specific needs of persons with physical, sensory, or cognitive disabilities;
- operators use clear and respectful language, avoiding behaviour that could create relational or psychological barriers.

PROCEDURES FOR REPORTS AND COMPLAINTS

Users may submit reports, suggestions, or complaints regarding the service:

- by certified electronic mail (PEC) to the Municipality of Recanati's address: comune.recanati@emarche.it;
- at the Social Welfare Front Office (Sportello di Segretariato Sociale): Piazza Leopardi, 26, Recanati (1st floor, above the Registry Office);
- at the Social Services and Education Office: Piazza Leopardi, 26, Recanati (3rd floor);
- by completing the dedicated feedback form available at the following link: https://forms.gle/NKQMstKwH5kx51y76.

The Municipality guarantees:

- a response within 30 days from receipt of the report;
- a thorough review of any reported service failure;
- documented corrective action in the event of well-founded complaints.

MONITORING AND CONTINUOUS IMPROVEMENT

The service ensures a high standard of quality through the adoption of a model of ongoing and coordinated monitoring among all parties involved, with the primary objective of maximising prevention and swiftly resolving any reported service failures, thereby ensuring the effectiveness, continuity, and safety of the care service.

Key figures within the coordination system are the Social Worker responsible for the Municipal Social Service and the Coordinator of the company providing the home care service, who:

- collect reports from beneficiary users, family members, or legal representatives;
- plan improvement actions and updates to the Service Charter;
- carry out an annual review of the levels achieved by the service provided. To this end, the Service Coordinator prepares an annual report describing the functions performed, the critical issues identified, and proposals for resolving any problems encountered or improving the operation of the service.

ORGANISATIONAL CONTACTS

REFERENCE	DETAILS
Responsible Authority	Municipality of Recanati – Citizen Services and General Affairs Area
Competent Office	Social Services and Public Education Sector
Telephone Contacts	071/75871 (switchboard) / 071/7587478 (Social Welfare Front Office) / 071/7587277 (Referring Social Worker) / 071/7587224 (Social Services Office)
Email	servizisociali@comune.recanati.mc.it
Certified Email (PEC)	comune.recanati@emarche.it