

“Di Bolina”

Social Cooperative ONLUS
Register of Cooperative Societies no. A136992

**RESIDENTIAL CENTRE FOR PEOPLE WITH
DISABILITIES
WITH SOCIO-HEALTHCARE SERVICES
(RD4)
DOPO DI NOI**

SERVICE CHARTER



“Di Bolina”

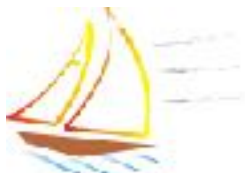
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Introduction

The “Di Bolina” Social Cooperative was founded in May 2004 and since September of the same year it has managed a socio-educational rehabilitation centre for people with disabilities, which is its main purpose and defining mission.



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GENERAL INFORMATION ABOUT THE ORGANISATION

General information:

Entity name	“DI BOLINA” SOCIAL COOPERATIVE – COOPERATIVE SOCIETY
Tax code	01524490438
VAT number	01524490438
Legal form and qualification under the Third Sector Code	Type A Social Cooperative
Registered office address	VIA ARNO 22 - 62010 - TREIA (MC)
Cooperative Register no.	A136992
Telephone	392-9967960
Fax	
Website	www.cooperativasocialedibolina.com
Email	presidenza@cooperativasocialedibolina.it
Certified email (PEC)	dibolina@gigapec.it
ATECO codes	88.99.00
	01.11.40 – 01.13.10 – 96.09.09

Areas of operation

Province of Macerata

1. Values and objectives pursued

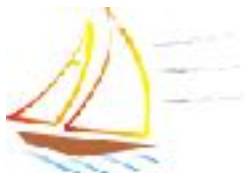
The Di Bolina Social Cooperative pursues mutualistic aims, mainly carrying out educational and rehabilitation activities for people with disabilities. Other activities provided for in the articles of association/memorandum of incorporation are ancillary/supplementary. The Cooperative pursues the well-being of its users and worker members, of their families and of the social context in which the “Di Bolina” Cooperative operates.

The values pursued are expressed as follows:

The general objectives that the Cooperative intends to achieve through its work and proposed activities are:

1. *Creating an **innovative** way of taking care of people with disabilities.*
2. *Working through **networked collaboration**, through the sharing and co-design of interventions.*
3. *Moving beyond the care-based approach and offering **individualised educational pathways**, for the development of autonomy and positive relationships.*
4. *Promoting **socialisation** in the group, within the group, through the group, towards integration with the local community.*
5. *Building a **therapeutic and holistic space**.*
6. *Creating a quality service, visible in its projects, **assessable** in its objectives, **transferable in its results**.*

The educational interventions and the space-time organisation used in the management of the socio-educational rehabilitation centre refer to the studies on the theoretical construct of psychological well-being by *Carol Ryff*, affiliated with the School of *Well-Being Therapy* and, in particular, to the **six dimensions of well-being**, presumed to be



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transversal to humankind and supported by numerous international studies. The **six dimensions** identified by Ryff, which guide the Centre’s educators and managers in structuring interventions, are the following:

- **Self-acceptance:** a positive acceptance of one’s own self.
- **Personal growth:** seeing oneself in continuous growth.
- **Purpose in life:** the feeling that one’s life has meaning.
- **Environmental mastery:** the ability to manage one’s environment and make use of its opportunities.
- **Autonomy:** self-determination, independence.
- **Positive relations with others:** trust, empathy.

In concrete terms, this theoretical construct merges with the potential that the environment offers and with the action of our team. The setting in which the Residential Centre is located offers numerous opportunities and possibilities to develop skills and autonomy. The greenery around the facility, the river, the vegetable garden that Di Bolina makes available to the Centre, but also practical collaboration in the running of the house, and small and “big” responsibilities, are considered essential learning tools. The refinement of abilities takes place in the daily, family context, through a structured routine, but also through the flexibility of the environment, so that what is learned can be transferred and used in other settings and conditions. We avoid reproducing a school-like model of management and activities, which would keep the person with disabilities in the condition of an “eternal child”; instead, each person is first and foremost an individual to be actively accompanied on their growth path towards maturity and adulthood.

2. Methodological aspects: educational and care approach

Our methodological approach is person-centred, with particular attention to the specific needs of each individual. The main guidelines of our intervention include:

- **Individualised and personalised approach:** each user is welcomed with a personalised intervention plan, which takes into account their abilities, difficulties, aspirations and wishes.
- **Multidisciplinary approach:** educational and rehabilitation treatment relies on teamwork made up of educators, psychologists, therapists, social workers and specialised professionals, who work in synergy to support the person’s growth and inclusion process.
- **Focus on autonomy and inclusion:** activities are designed to promote self-sufficiency and social integration, stimulating the development of relational, cognitive and vocational skills.

3. Organisation of the Service

The **Residential Centre** is organised in a clear and efficient way, with several **functional areas** designed to meet the educational, rehabilitation and social needs of people with disabilities.

- **Welcome and assessment:** upon entry, each person undergoes a **multidisciplinary assessment** which helps define the personalised educational and rehabilitation pathway.
- **Educational and rehabilitation activities:** we work with users on activities ranging from education to socialisation, from occupational therapy to creative and motor activities.
- **Psychological and family support:** our centre also offers a **psychological support** service, with counselling sessions for families and continuous monitoring of the user’s emotional and psychological well-being.

4. Purposes and objectives

The centre is an educational and social facility aimed at enhancing the cognitive, communicative, relational and occupational abilities of people with psycho-physical and mental distress; at socialisation and integration into their

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living environment; at promoting autonomy and, where possible, at moving towards integration into the world of work. The **methods** applied are based on an **individualised and flexible** approach, which allows activities to be continuously adapted to the user's progress. In addition, each intervention is subject to **continuous monitoring**, with periodic assessments to guarantee the achievement of the set objectives.

The **quality standards** are defined on the basis of regional and national regulations and are applied rigorously to guarantee maximum efficiency, safety and well-being for every person welcomed.

Purposes:

- Promoting the autonomy, social inclusion and quality of life of residents.
- Offering a protected and stimulating environment that fosters psycho-physical well-being and personal development.
- Actively collaborating with families and local services to guarantee continuity of care and personalised interventions.

Service characteristics:

- **Personalised welcome:** individualised pathways based on educational and life projects.
- **Inclusive environment:** facilities and common spaces designed to stimulate participation and interaction.
- **Multidisciplinary support:** integrated interventions by educators, social and healthcare workers, psychologists and other specialised professionals.

5. Who the service is for

The centre serves:

- **People with physical and/or intellectual disabilities**, of adult and minor age, who need support in managing daily life.
- **Users in conditions of fragility or vulnerability**, who require personalised interventions to achieve greater autonomy and social integration.

6. Operation

The Centre is open all year round.

7. Quality Standards

The Centre undertakes to:

- **Ensuring excellence:** continuous monitoring of processes and results through assessment tools and internal audits.
- **Guaranteeing continuous updating:** periodic and specialised staff training.
- **Collecting feedback:** satisfaction surveys addressed to users, families and staff, in order to constantly improve the service.

Promoting innovation: integrating new methodologies and technologies in line with industry best practices.

Quality Standards and Guarantee of Rights

Our centre guarantees:

- **Continuous improvement** of care and support activities.



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- **The right to transparent information** for users and families.
- **Privacy protection** for users at all stages of processing.
- **Protection of the rights** of every person welcomed, in compliance with current regulations.

8. Access to the facility

- Admission procedures:
 - Applications for admission must be submitted using the dedicated form, following assessment by the relevant UMEA, and subsequently by an internal committee, which analyses the applicant's clinical profile and needs, for the 7 authorised/accredited RD4 places. For the remaining places, applications for admission will be assessed by the internal committee.
 - The admission decision is made in collaboration with the families, the healthcare staff and, when necessary, with the support of external consultants.
- Timeframes:
 - The outcome of the application will be given as soon as possible and in any case no later than 30 days from the submission of the complete documentation.
 - Access to the Centre takes place as soon as possible, according to the availability of places and the priorities identified in the personalised life pathway.
- Priority criteria:
 - Priority is given to continuity of care within the “Di Bolina” Social Cooperative for persons already involved in previous educational, rehabilitation or inclusion projects.
 - For persons not already supported by Di Bolina, account will be taken of behavioural compatibility with community life, the availability of places and the suitability of the personalised project, also in relation to the other users.
 - In any case, account will be taken of the financial sustainability of admissions, in the interest of the Cooperative's continuity.

Financial aspects

- The monthly fee is set annually by the Board of Directors. For the year 2026, the cost of admission to the residential service is €2,500 (two thousand five hundred/00).
 - Upon admission, each family undertakes to pay a minimum fee share of **€1,300 (one thousand three hundred/00)**. In addition, a monthly contribution of €100 is required for sharing the costs of activities, hairdresser, barber and personal hygiene products.
 - The eventual difference between the fee and the amount paid by the family will be covered by the public body, when available, and by the Cooperative's own resources.
- Failure to pay two monthly fees triggers the reminder procedure, at the end of which, in the most serious cases and in the interest of the Cooperative's sustainability, the Board of Directors may decide to request suspension or exclusion. **Calculation criteria:** the contribution towards costs is “Di Bolina” Social Cooperative – Via Arno, 22 – 62010 Treia – Macerata, Italy – Tax Code and VAT no. 01524490438
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defined on the basis of transparent and shared criteria, which take account of family resources and any public contributions.

- **Notification of fees:** the tariffs and related payment methods will be made known through information meetings and accessible documentation. The contribution provides for a monthly fee to be settled within 10 days of the issue of a regular invoice.
- **Updates:** any changes will be communicated promptly, with the involvement of families and, where necessary, with adequate support measures.
- **Refund/Reimbursement:** any refunds for early termination of the admission pathway or of the apartment group placement must be requested by email within 30 days of discharge. amministrazione@cooperativasocialedibolina.it

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9. Right to Information and Privacy

- **Transparency:** all users and their families are entitled to clear and comprehensible information about the organisation of the service, the care pathways and the access procedures.
- **Privacy:** personal data is processed in full compliance with current legislation (GDPR and national regulations) and with specific security procedures.
- **Access to documents:** the right to access, rectify and erase personal data is guaranteed upon request.

10. Waiting Time Management

- **Transparency of timeframes:** in the event of waiting lists, information on waiting times and priorities will be made public and updated periodically.
- **Access criteria:** priority will be determined on the basis of the severity of the need, the urgency of the care pathway and the resources available. Priority will be given to continuity of care for persons with active educational and inclusion pathways at the “Di Bolina” Social Cooperative.
- **Proactive communication:** the centre undertakes to inform families promptly about progress and any changes in access times.

10. Organisation and Rules of Community Life

- **Daily routine:** the centre organises structured and flexible activities, including educational pathways, recreational activities, workshops and socialisation moments.
- **Respect and responsibility:** each resident is required to respect shared rules, aimed at guaranteeing the well-being and safety of all.
- **Common areas:** rooms dedicated to rest, play and training, where respect for individual privacy and mutual support coexist.
- **Active involvement:** community life is organised through periodic meetings, councils and moments of discussion that encourage user participation.

11. Family Participation

- **Active participation:** families are invited to participate actively in the life pathway of their loved ones, through regular meetings, personalised interviews and involvement in educational projects.



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- **Support and counselling:** the centre offers guidance, counselling and family mediation tools to encourage dialogue and mutual support.
- **Collaboration with staff:** families can report observations and suggestions, which will be integrated into the personalised intervention plans.

12. Visiting Hours and Arrangements for Relatives and Acquaintances

- **Set hours:**
 - **Monday to Friday:** from 4:00 pm to 8:00 pm
 - **Weekends and public holidays:** from 10:00 am to 6:00 pm
- **Visiting arrangements:**
 - Visits must be scheduled, in line with daily activities and with respect for the privacy and rest times of residents.
 - In particular situations or emergencies, extraordinary arrangements can be agreed with the centre's staff.
- **Behavioural rules:** all visits must take place with respect for the dignity, safety and well-being of users.

13. Staff Profile and Training Criteria

- **Staff profile:**
 - **Multidisciplinary and qualified:** the team includes educators, social and healthcare workers, psychologists, social workers and administrative staff, all with specific skills in the field of assistance to people with disabilities.
 - **Well-being focus:** the staff is characterised by empathy, professionalism and attention to individual and collective needs.
- **Training criteria:**
 - **Initial and ongoing training:** all staff undergo compulsory training courses and periodic updates to maintain high standards of care and acquire new skills.
 - **Specialisation in specific sectors:** courses and seminars on topics such as emergency management, inclusive education, empathetic communication and the use of technological tools to support care.
 - **Periodic assessment:** staff are regularly assessed through feedback, self-assessment and supervision, in order to guarantee constant improvement of the quality of the service.

14. Insurance cover

Insurance cover

- Civil liability: third-party liability (RCT) and operator liability (RCO): “social care and welfare services for people with disabilities” – Di Bolina Cooperative.

Policy no. 460160929 issued on 23/06/2026

16. Organisational arrangements

The Residential Centre is organised as follows: **FUNCTION CHART**



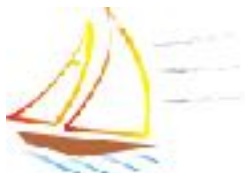
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ORGANISATION CHART

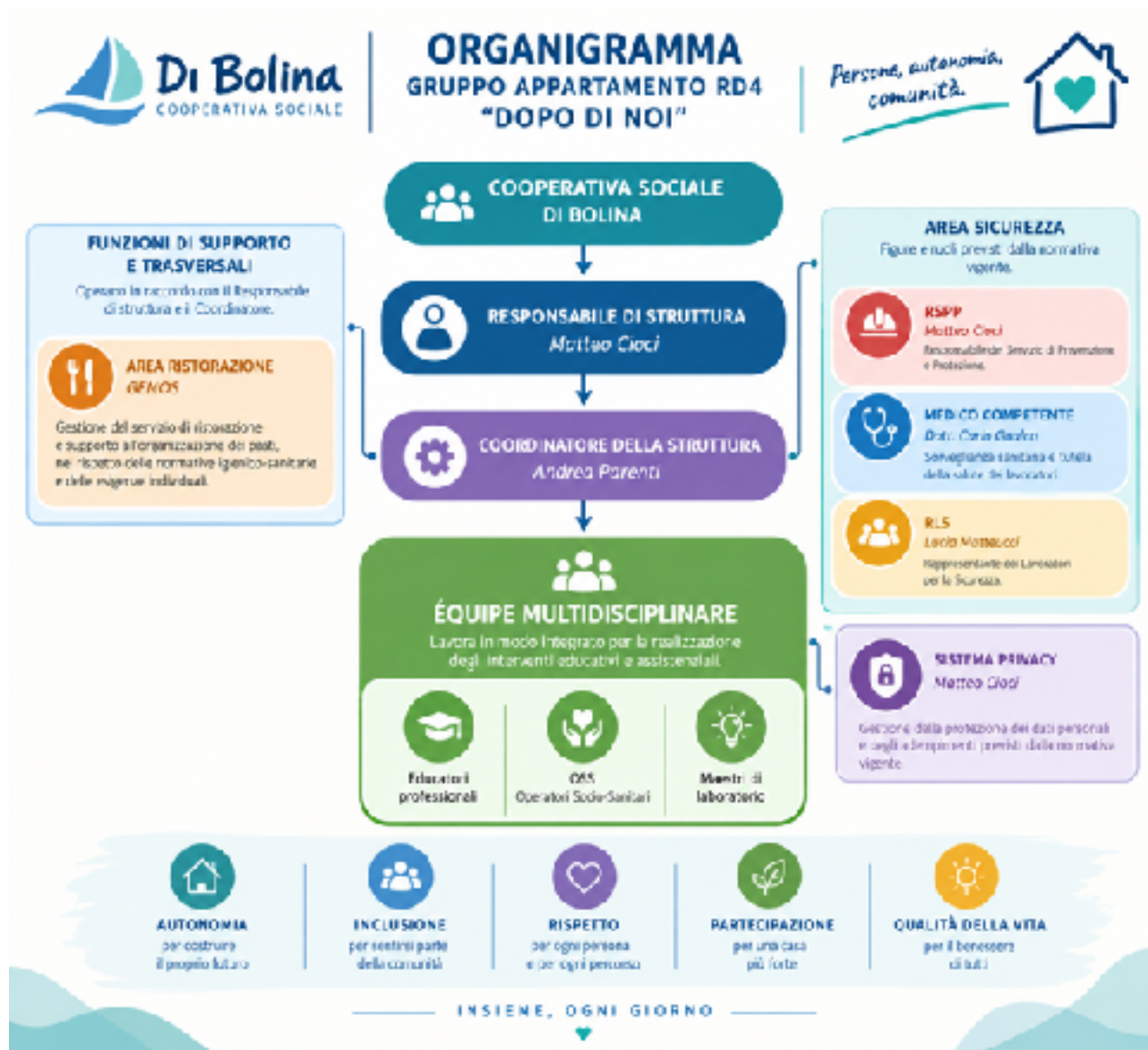
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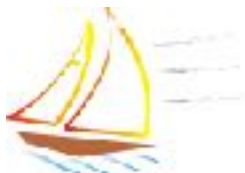
17. Working methodology

The staff's work is **team-based** and **network-based**.

TEAM

Team members:

Coordinator: responsible for drawing up the personalised educational project, for liaison with and between the services and the family, and for identifying activities aimed at the acquisition, maintenance and improvement of the abilities of each individual and of the group.



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Educators: they follow the person throughout the day. They carry out observations, implement individualised and group educational interventions, act as a link between activities and support the person within the pathway.

Social and healthcare assistant: performs care and personal assistance functions.

Workshop instructors: they draw up workshop projects and propose activities in agreement with the educational team.

18. Working Hours Organisation and Staff Coverage

The service is **active 24 hours a day**. From Monday to Friday, guests take part in activities outside the centre. Staff covers any closures or sickness absences. From 4:00 pm to 8:00 am the following day, and on Saturdays and public holidays, **staff shifts** are organised to guarantee a **constant presence** and continuous support for users.

19. Networking and territorial links

The centre collaborates and shares experiences and interventions with:

- LOCAL AUTHORITY SOCIAL SERVICES
- UMEA
- DEPARTMENTS OF MENTAL HEALTH
- LOCAL TERRITORIAL AREA
- SCHOOLS
- UNIVERSITIES
- LOCAL BUSINESSES
- FAMILIES
- SPECIALISTS (*professionals who have the user in their care*)
- OTHER PARTNERS (*specialist facilities, other cooperatives, etc.*)

• Services

RESIDENTS' HOME MUNICIPALITIES

The representatives of the municipalities that have users in the centre, in addition to assessing the individual's pathway, coordinate and participate in the definition of:

- General objectives to be pursued;
- Procedures for monitoring the implementation of the general project;

The cooperative reports on the overall performance of the facility and keeps on file the documentation on these meetings, the problems that emerged and the shared solutions identified.

LOCAL TERRITORIAL AREA

It participates in the definition of specific projects and in the communication of services to the member municipalities.

It promotes staff training activities and offers support in disseminating initiatives related to disability. It coordinates the trade associations in the preparation of local area plans – disability sector.

AST – LOCAL HEALTH AUTHORITY (UMEA AND DSM)



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The Centre collaborates with the UMEA Services of Macerata and Civitanova Marche on the Personalised Educational Projects drawn up for each user.

With the UMEA, the purpose of the meeting is to:

- supervising intervention methods and planning;
- verifying the pathways implemented and the validity of the objectives and tools;
- proposing new cases for admission;
- meeting periodically, where necessary, with users' family members, in order to gain an overall picture or to promote alternative pathways.

With the DSM (Department of Mental Health), the meeting is less structured, although the territorial team is present at the facility on a monthly basis. Meetings with the psychiatrists of the Psychiatric Service are held periodically, for the persons they support.

The DSM performs supervision, therapy review and crisis intervention functions.

SCHOOLS

The centre collaborates with some upper secondary schools in the province of Macerata, for the development of projects introducing students to the socio-educational rehabilitation centre.

UNIVERSITIES

The centre hosts training internships under agreements with:

- Education Sciences, University of Macerata;
- Social Work, University of Macerata;
- Faculty of Medicine and Surgery, Degree Course in Professional Education, Marche Polytechnic University;
- Faculty of Psychology, University of Urbino.

20. Hospitality Agreement and Users' Rights

- Each person welcomed signs a **hospitality agreement** which defines the **rights** and **responsibilities** of both parties, in a pathway that also actively involves the **families**. The agreement includes all the information necessary for **informed access** to the services.

21. Training programme

The training of the residential centre's staff will be organised according to specific training pathways.

PATHWAY 1 – in-house training on educational interventions

The course, led by the medical director, includes the use of information material and will be structured in a learning phase and a circular case-supervision phase. The topics covered will include:

- The WELL-BEING THERAPY model: *WBT and education, case analysis*
- Elements of clinical psychology: *symptoms, mood disorders, anxiety disorders, psychotic disorders, notions of psychopharmacology.*

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- The helping relationship according to the constructivist model: *transferential aspects of the relationship, expectations, internal relational model, relational reading of provocation.*
- Group dynamics: *horizontal and vertical aspects of belonging to a group.*
- The family context in mental and psychiatric disability.
- Prevention of professional burnout: *symptoms and early warning signs, teamwork and sharing as tools for preventing operator burnout.*

The meetings, lasting 1 hour and 30 minutes, will take place weekly.

PATHWAY 2 – in-house training on methodology

On a quarterly basis, the staff team will be trained on the correct methodologies relating to specific operational areas.

Professionals will be involved with regard to:

- Hygiene and Prevention;
- Food hygiene;
- Correct use of equipment for greenhouse, vegetable garden and gardening work;

22. Meal Service and Dietary Arrangements

The **Centre** guarantees the provision of **personalised meals** according to the nutritional and dietary needs of each user, with attention to **intolerances** or specific **diets**.

23. Operating Regulations

The Centre’s **Operating Regulations** establish the **rules of community life** that users and families are required to respect, in a context of **mutual respect and shared responsibility**.

The “**Di Bolina**” Social Cooperative is committed to guaranteeing a quality service, **personalised and inclusive**, for the well-being and growth of people with disabilities, in full respect of their rights and aspirations.

24. Conclusions and Commitments

The Di Bolina Social Cooperative is committed to guaranteeing:

- **A service of excellence**, founded on the principles of respect, participation and transparency.
- **Active listening** to users, families and staff, so that every intervention is consistent with the needs and expectations of the community.
- **Constant updating** of processes and skills, to face the challenges of the present and the future with flexibility.