SERVICE CHARTER

Via Quirino Majorana

Outpatient Clinic ex art. 26

OUTPATIENT AND HOME-BASED REHABILITATION CENTRE

Definitive institutional accreditation: Lazio Regional Council Resolution (DGR) no. 219 of 27/04/2021

Unisan Gruppo

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What the Service Charter is

The Service Charter of the Unisan Group's Outpatient and Home-Based Centre is a tool for protecting the right to health of the people who use and take part in the services and interventions offered.

This document aims to give the company's stakeholders, and everyone who uses the Centre, an accessible and transparent picture of how it operates: the services it provides, the tools it uses, the conditions under which it carries out its activities and its participation mechanisms.

The Service Charter is a tool through which Unisan intends to establish a dialogue with its service users, promoting information, protection and participation, and undertaking, in accordance with the directives of the Prime Ministerial Decree (D.P.C.M.) of 19/5/1995, to respect and verify the quality standards adopted.

Information contained in this document

- The Group itself;
- details of the services provided by the Outpatient and Home-Based service of Via Q. Majorana, and how to access them;
- the opening hours of the Centres;
- the ways in which Unisan ensures that the rights of citizens/service users are respected, including through quality checks on the services provided by the organisation.

Distribution of the document

The Charter is distributed in the Centres, where it is made available to service users in the designated spaces in the common areas, and at the service user's/patient's home in the case of home-based services.

General principles

Equality	The provision of the service is based on the principle of equal rights for all service users. No distinction may be made in the provision of the service on grounds of sex, race, language, religion or political opinion.
Continuity	Within the arrangements laid down by the regulations governing the sector, the service must be provided continuously, regularly and without interruption. Cases of irregular operation or interruption of the service are also expressly governed by the sector regulations, without prejudice to the Group's duty, in such cases, to adopt measures to cause service users the least possible inconvenience.
Participation	In order to protect the right to the proper provision of the service, and to encourage cooperation with the Unisan Group, citizens' participation in the provision of the service is guaranteed. In particular, service users have the right to access the information concerning them held by the service provider, and may submit observations and make suggestions for improving the service. Unisan gives service users feedback on the reports and proposals they make.
Right of choice	Service users have the right to choose among the providers of the service.
Efficiency and effectiveness	The services offered by the Group are provided in such a way as to guarantee efficiency and effectiveness.
Impartiality	The Unisan Group bases its conduct towards service users on criteria of objectivity, fairness and impartiality.

The main rehabilitation activities carried out at the Via Q. Majorana Outpatient and Home-Based Rehabilitation Centre

Rehabilitation healthcare on a non-residential outpatient basis

Activities with the service user present

- Rehabilitation activities provided for by the SIAR (Regional Rehabilitation Information System): neurolinguistic cognitive therapy, cognitive behavioural therapy, physiotherapy - neuromotor therapy, neuropsychomotor therapy, speech and language therapy.
- Assessment activities provided for by the individual plan, carried out through structured and unstructured observation and through the administration of specific tests, as laid down in the SIMFER-SINPIA recommendations (Italian Society of Physical and Rehabilitation Medicine - Italian Society of Child and Adolescent Neuropsychiatry).
- Medical healthcare activities.

Activities without the service user present

- Psychoeducational and counselling sessions with service users' family members or with the contact persons of residential facilities for institutionalised service users.
- Drafting and preparation of the individual rehabilitation plan.
- Clinical and organisational team meetings.
- Preparation of diagnostic certificates and assessment reports required under Law 104/92.
- Participation in GLOs (Operational Working Groups) in a network with school staff.

The staff working in the outpatient service are

- Medical specialists in child neuropsychiatry, neurology, physical and rehabilitation medicine
- Psychologists and social workers
- Developmental neuro- and psychomotor therapists
- Physiotherapists (rehabilitation therapists)
- Speech and language therapists
- Occupational therapists

The main rehabilitation activities carried out at the Via Q. Majorana Outpatient and Home-Based Rehabilitation Centre

Home-based rehabilitation healthcare

Services are provided directly at the service user's home. Rehabilitation is organised into rehabilitation plans agreed between medical, technical and rehabilitation staff at dedicated team meetings.

Activities with the service user present (at home)

- **Rehabilitation activities provided for by the SIAR (neurolinguistic cognitive therapy, cognitive behavioural therapy, physiotherapy - neuromotor therapy, neuropsychomotor therapy, speech and language therapy).**
- **Assessment activities provided for by the SIAR.**
- **Medical healthcare activities.**

Activities without the service user present

- **Drafting and preparation, at the Centre, of the individual rehabilitation plan.**
- **Clinical team meetings.**
- **Organisational meetings.**
- **Preparation of diagnostic certificates and assessment reports required under Law 104/92.**

PART ONE

Introduction

Who we are

UNISAN Gruppo was founded in 1989 and since 2006 has worked in rehabilitation in the Municipality of Rome and its Province, running residential, semi-residential, outpatient and home-based facilities accredited by the Lazio Region.

Its main activities

- Assistance, care and rehabilitation of people with physical and mental disabilities
- Setting up and running residential and semi-residential care services and Centres, such as day centres and group homes
- Setting up and running outpatient clinics for the care, rehabilitation and assistance of non-self-sufficient people (including on a temporary basis)
- Rehabilitation interventions aimed at the social reintegration of people with mental or physical disabilities
- Running home-based services
- Support service for the families of people who are not self-sufficient or have disabilities.

The Group's services

- Residential Centres ex art. 26
- Semi-residential Centres ex art. 26
- Outpatient Rehabilitation Centres ex art. 26
- Home-based Services
- Early childhood education services
- Support service for the families of people who are not self-sufficient or have disabilities.

Useful information and numbers

Unisan Gruppo, Via del Casale de Merode 8 - 00147 Rome (registered and administrative office)

- +39 06 96032032 (switchboard)
- +39 375 7913283 (Via Q. Majorana outpatient clinic)
- +39 375 7912922 (Via Q. Majorana home-based service)
- coord.majorana@unisan.it
- domiciliare.m@unisan.it
- info@unisan.it / unisan@pec.unisan.it (certified email, PEC)

PART TWO

The regulatory framework

The main national and regional rules governing the services and facilities of the Unisan Group. Acts are identified by their Italian designation; titles are given in English translation.

Regional Law (Legge Regionale) no. 80 of 2.12.1988
Rules on home care.

Lazio Regional Council Resolution (DGR) no. 1020 of 29.11.1989
Guidelines and directives to Local Health Units on the organisation and implementation of home care.

Law (Legge) 5.2.1992, no. 104
Framework law on assistance, social integration and the rights of persons with disabilities.

Legislative Decree (D. Lgs.) 30.12.1992, no. 502
Reorganisation of health legislation, pursuant to Article 1 of Law 421/92.

Law (Legge) 23.3.1993, no. 84
Regulation of the social work profession and establishment of the professional register.

Ministry of Health Decree (DM) 14.9.1994, no. 739
Identification of the university diploma for nurses.

Ministry of Health Decree (DM) 14.9.1994, no. 741
Regulation identifying the role and professional profile of the physiotherapist.

Ministry of Health Decree (DM) 14.9.1994, no. 742
Regulation identifying the role and professional profile of the speech and language therapist.

Legislative Decree (D. Lgs.) 19.6.1999, no. 229, art. 3 septies
Rules for the rationalisation of the National Health Service; integration of health and social care.

Ministry of Health Decree (DM) 27.7.2000
Equivalence of diplomas and certificates to the university diploma of developmental neuro- and psychomotor therapist, for professional practice and access to post-basic training.

Law (Legge) 8.11.2000, no. 328
Framework law for the creation of the integrated system of social interventions and services.

Legislative Decree (D. Lgs.) 8.6.2001, no. 231
Rules on the administrative liability of legal persons, companies and associations, including those without legal personality.

Final Document of the Commission on Home Hospitalisation, under Ministry of Health Decree of 12.4.2002

Regional Law (Legge Regionale) no. 4 of 3.3.2003
Rules on authorisation to build facilities and to carry out health and social-health activities, institutional accreditation and contractual agreements.

Lazio Region Social Department Circular no. 3 of 1.4.2003
Integrated Home Care (ADI).

Legislative Decree (D. Lgs.) 30.06.2003, no. 196
Personal Data Protection Code, as amended by Legislative Decree 10.8.2018, no. 101, which brought it into line with Regulation (EU) 2016/679.

Lazio Region Determination no. D1598 of 7.6.2006
Directives implementing DGR 143 of 22 March 2006. Information flows and invoicing of health services.

Lazio Regional Council Resolution (DGR) no. 435 of 19.6.2007
Plan for the recovery, development, rebalancing and modernisation of healthcare in Lazio. Clinical criteria for access to extensive and maintenance rehabilitation treatment on a non-residential basis.

Lazio Regional Council Resolution (DGR) no. 433 of 19.6.2007
Guidance and measures for initiatives aimed at integrating health and social-health activities. Promotion of de-hospitalisation processes in the Lazio Region.

Lazio Regional Council Resolution (DGR) no. 636 of 3.8.2007
Implementation of the Recovery Plan under DGR no. 149/07, "Approval of the principles for drafting the institutional accreditation regulation in the Lazio Region" and "Additional requirements - general part for institutional accreditation in the Lazio Region".

Lazio Regional Council Resolution (DGR) no. 40 of 25.1.2008
Adoption of the regional Multidimensional Assessment tool for the admission and taking into care of people with complex care needs.

Legislative Decree (D. Lgs.) 9.4.2008, no. 81
Consolidated act on health and safety at work.

Lazio Regional Council Resolution (DGR) no. 325 of 8.5.2008
Subject: "Approval of the additional requirements for the Home Care Service".

Lazio Regional Council Resolution (DGR) no. 326 of 8.5.2008
Subject: "Optimisation of the regional model of home healthcare and related tariffs".

Decree of the President of the Lazio Region as Commissioner ad Acta (DCA) no. 14 of 5.9.2008
Approval of the document entitled "Authorisation requirements for rehabilitation facilities supplementing DGR no. 424/06". B.U.R.L. no. 34 of 13 September 2008, Ordinary Supplement no. 115.

Decree of the President of the Lazio Region as Commissioner ad Acta (DCA) 5.9.2008, no. 16
Requalification of post-acute care provision, both for hospital admission and specialist outpatient care. Approval of the redefinition of the system of provision. B.U.R.L. no. 34 of 13 September 2008, Ordinary Supplement no. 115.

Decree of the President of the Lazio Region as Commissioner ad Acta (DCA) no. U0017 of 5.9.2008
Implementation of a specific objective of the recovery plan, point 1.1 (1.1.1 1.2.1a): approval of the document on the reconfiguration of the regional provision of non-hospital residential healthcare for older people.

Decree of the President as Commissioner ad Acta (DCA) no. U0018 of 5.9.2008
"Approval of the Programme for health and social care integration in the Lazio Region" and of the "Guidelines for drafting the three-year Local Implementation Plan 2008-2010".

Interministerial Decree 19.2.2009
Definition of the degree classes for the health professions.

Measure of the State-Regions and Autonomous Provinces Conference 3.12.2009
Agreement, pursuant to article 8(6) of Law of 5 June 2003, no. 131, between the Government, the Regions and the Autonomous Provinces of Trento and Bolzano on the new Health Pact for 2010-2012 (Register no. 243/CSR).

Decree of the President as Commissioner ad Acta (DCA) no. U0087 of 18.12.2009
Approval of the Regional Health Plan 2010-2012.

Law (Legge) 15 March 2010, no. 38
Provisions to guarantee access to palliative care and pain therapy (Official Journal, General Series no. 65 of 19 March 2010).

Decree of the President as Commissioner ad Acta (DCA) no. U0090 of 10.11.2010
Approval of: "Minimum authorisation requirements for carrying out health and social-health activities" (Annex 1), "Additional requirements for accreditation" (Annex 2), "Information System for the Authorisation and Accreditation of Health Facilities (SAAS) - User manual" (Annex 3). Adoption of definitive accreditation measures pursuant to art. 1, paragraphs 18 to 26 (Provisions for the definitive institutional accreditation of private health and social-health facilities), Regional Law of 10 August 2010, no. 3.

Decree of the Commissioner ad Acta (DCA) 10 February 2011, no. U0008
Approval of the consolidated text "Minimum authorisation requirements for the provision of health and social-health activities".

Decree of the President as Commissioner 20 March 2012, no. 39/2012
Community care. Redefinition and reorganisation of residential and semi-residential care for non-self-sufficient people, including older people, and people with physical, mental and sensory disabilities.

Decree of the Commissioner ad Acta (DCA) 24 December 2012, no. U00434
Minimum structural, technological and organisational authorisation requirements for facilities providing rehabilitation to people with physical, mental and sensory disabilities following the reorganisation under DPCA no. 39 of 20 March 2012. Amendment to chap. 4.2 of DPCA no. 8/2011 and full replacement of chaps. 3.4 and 7.2 of DPCA no. 8/2011.

Decree of the Commissioner ad Acta (DCA) 13 May 2016, no. U00159
Reorganisation of rehabilitation pathways in hospital and community settings.

Regulation (EU) 2016/679 of 27.4.2016 (GDPR)
General Data Protection Regulation: protection of natural persons with regard to the processing of personal data and the free movement of such data.

Regional Law (Legge Regionale) no. 11 of 10.8.2016
Integrated system of social interventions and services of the Lazio Region.

Prime Ministerial Decree (DPCM) 12.1.2017
Definition and update of the essential levels of care (LEA).

Law (Legge) 8.3.2017, no. 24
Provisions on the safety of care and of the person receiving care, and on the professional liability of health professionals.

Decree 12 April 2017, no. G04762
New tariffs ex art. 26.

Decree of the Commissioner ad Acta - enforcement of Lazio Regional Administrative Court (TAR) Judgment, Section III quater, no. 11491 of 17 November 2016
Definition of tariffs for intensive, extensive and maintenance community rehabilitation for people with physical, mental and sensory disabilities.

Decree of the Commissioner ad Acta (DCA) 7 November 2017, no. U00469
Provisions on authorisation amending and supplementing DCA 8/2011. Adoption of the Accreditation Manual implementing the Health Pact 2010-2012.

Law (Legge) 22.12.2017, no. 219
Rules on informed consent and advance treatment directives.

Lazio Regional Council (Consiglio Regionale) Resolution no. 1 of 24.1.2019
Regional Social Plan "Prendersi cura, un bene comune" (Taking care, a common good).

Regional Regulation (Regolamento Regionale) 6.11.2019, no. 20
Regulation on authorisation to build, authorisation to operate and institutional accreditation of health and social-health facilities, implementing articles 5 and 13 of Regional Law 3 March 2003, no. 4.

Decree of the Commissioner ad Acta (DCA) of 22 July 2020, U00101
Approval of the technical document "Eligibility criteria for community rehabilitation pathways".

Legislative Decree (D. Lgs.) 31.3.2023, no. 36
Public Contracts Code.

PART THREE

Types of activity

Rehabilitation healthcare on a non-residential outpatient basis

- Rehabilitation activities provided for by the SIAR: neurolinguistic cognitive therapy, cognitive behavioural therapy, physiotherapy - neuromotor therapy, neuropsychomotor therapy, speech and language therapy.
- Assessment activities provided for by the individual plan, carried out through structured and unstructured observation and through the administration of specific tests, as laid down in the SIMFER-SINPIA recommendations.
- Medical healthcare activities.

- Psychoeducational and counselling sessions with service users' family members or with the contact persons of residential facilities for institutionalised service users.
- Drafting and preparation of the individual rehabilitation plan.
- Clinical and organisational team meetings.
- Preparation of diagnostic certificates and assessment reports required under Law 104/92.
- Participation in GLOs (Operational Working Groups) in a network with school staff.

Home-based rehabilitation healthcare

Services are provided directly at the service user's home. Rehabilitation is organised into rehabilitation plans agreed between medical, technical and rehabilitation staff at dedicated team meetings.

- Rehabilitation activity provided for by the SIAR (neurolinguistic cognitive therapy, cognitive behavioural therapy, physiotherapy - neuromotor therapy, neuropsychomotor therapy, speech and language therapy); assessment activities provided for by the SIAR; medical healthcare activities.

- Drafting and preparation, at the Centre, of the individual rehabilitation plan; clinical team meetings.
- Organisational meetings; preparation of diagnostic certificates and assessment reports required under Law 104/92.

PART FOUR

Telerehabilitation

Unisan Gruppo telerehabilitation project - Developmental age / adult section

During the SARS-CoV-2 health emergency, in view of the need to maintain the continuity of care that is essential for the extremely vulnerable service users attending the Via Majorana outpatient services, in view of the need to keep the network of services for service users functioning well, in view of the ethical duty to support the many families who have entrusted themselves to our services over time, taking into account the order of 13-03-2020 of the President of the Lazio Region, ref. no. Z00008, which reaffirmed the need to continue on site only those therapies that genuinely could not be postponed, and in compliance with the operational guidance for child and adolescent neuropsychiatry services and developmental rehabilitation services issued by the Italian Society of Child and Adolescent Neuropsychiatry (SINPIA), the multidisciplinary team of the Via Quirino Majorana outpatient clinic developed a telerehabilitation project with the aim of converting the speech and language, psychomotor, cognitive and psychological therapies provided on site into therapies that could be delivered remotely (telerehabilitation), using specific IT platforms and software designed for online use.

This service is currently provided in specific circumstances where physical access to the outpatient services is not possible, or through the Home-Based Service in the case of online psychological support.

PART FIVE

How to access the service

Eligibility criteria; priorities; waiting lists

Applications to use the services provided by the UNISAN Centres must be submitted to the Medical Directorate/coordination service, together with the specialist medical documentation, by the service user or by the person exercising parental responsibility or legal guardianship (in the case of a person lacking capacity), through the social worker.

The coordination service, supporting the Medical Directorate, updates the waiting list monthly. Service users may find out their position on the waiting list by making an express request to the service. The waiting list is sent periodically to the competent Local Health Authority (ASL).

To access treatment, the service user must be placed on the waiting list through registration exclusively at our administration/coordination offices. To be placed on the list, a prescription is required from a medical specialist at a tertiary centre or at the service user's own ASL for the specific disability, and the access criteria laid down by current legislation must be met.

Under the technical document "Eligibility criteria for community rehabilitation pathways" (Decree of the Commissioner ad Acta, D.C.A. U00101 of 22 July 2020), an individual rehabilitation plan is opened only for complex conditions and only after a visit by the doctor responsible for the plan.

In addition, particularly for children and adolescents, meetings with parents are held during the rehabilitation pathway, in which the treatment goals are shared and guidance is given on managing the child at home, and links are maintained with the school through GLOs and certifications aimed at school inclusion. Given the particular importance of developmental-age service users, contacts are maintained with the ASL child and adolescent mental health and rehabilitation services (TSMREE), with schools and, in some cases, with the Social Services of the service user's Municipality.

The access procedure

The access procedure can therefore be summarised as follows

- **Request for a specialist visit from the General Practitioner or the family Paediatrician, indicating the problem(s) to be assessed.**
- **Visit by the relevant medical specialist for the specific disability at a tertiary Centre or at the service user's ASL (child neuropsychiatrist at the T.S.M.R.E.E., physiatrist).**
- **Delivery of the hospital or ASL prescription to the UNISAN Centre, after giving consent to the processing of personal and sensitive data (Regulation (EU) 2016/679 - GDPR).**
- **Assessment by the Centre's Doctor Responsible for the Plan and identification of the arrangements and of the professionals of the rehabilitation team who will be part of the plan (P.R.I.).**
- **Individual Rehabilitation Plan: administration of standardised tests for diagnosis and follow-up, definition of the goals and of the treatments provided to achieve them, the care setting and the duration of the intervention.**

The rehabilitation plan

Service users' activities are organised through rehabilitation plans (P.R.I.) agreed between the Medical staff, Graduate Technicians and the Psychologist at dedicated team meetings. The plans are then submitted to the commissioning body for review and approval. Each plan is constantly monitored by the team and may be adjusted and modified in order to best achieve the set goals.

Unisan undertakes to guarantee the required standards of care, in real time with respect to the commissioning body's assessment and referral times, as well as compliance with the rules and regulations governing the area of care covered by the services provided, in line with the directives issued by the institutional bodies and by the commissioning body.

Protection in situations of vulnerability

When the person is taken into care, any (even temporary) vulnerability is identified by completing the forms prepared for the admission of new service users. Once a situation of vulnerability has been identified, the social worker informs the Medical Directorate of the need for a possible referral to the municipal social services for follow-up and/or for social support to complement the healthcare intervention already under way.

Information for service users

For any information about the outcome of an application, progress on the waiting list, or any other information about the Centres, the services offered, etc., service users can always contact the Unisan Group Social Service by calling +39 06 96032032 or +39 375 7913283.

Bookings

To book services, service users may go to the relevant Centre or - for outpatient services only - telephone the Centre (see the information in Part one). In this way, they can obtain all the information on the documentation to be provided and the waiting times for the service requested.

PART SIX

Rights and duties

Respect for the principles listed means that service users/patients are guaranteed specific rights, from which the duties of the Group's staff follow.

Access and attention	**Every service user/patient has the right to access the services, where they must be welcomed with courtesy, politeness, helpfulness and attention.**
Information	**Everyone has the right to receive information on how services are provided and documentation relating to the services received.**
Respect for the person	**Every service user/patient has the right to confidentiality and to respect for their personal dignity; the Group in any case operates in full compliance with current privacy legislation.**
Normality and difference	**Everyone has the right to be cared for with due regard to the specific needs arising from age, sex, nationality, culture and religion.**
Religious support	**Service users/patients have the right to receive religious support in accordance with their faith: once the service user's/patient's request has been received, the Medical Directorate contacts the relevant religious community to arrange such support.**
Trust and decision-making	**The relationship of trust between staff and the service user/patient (or their family), particularly when they provide information about their condition and needs, is of fundamental importance for the successful taking into care of the person, who also has the right to retain (personally or through their guardian) the ability to make responsible decisions about their own life.**
Complaints and their outcome	**Everyone has the right to make a complaint to report to the management any conduct not in line with this Service Charter, and to receive a response that serves as "redress" for the harm suffered (e.g. by introducing a specific corrective action to prevent a recurrence, or by sanctioning improper conduct).**

PART SEVEN

Participation tools

Complaints and suggestions

The possibility of making observations and complaints is an essential component of protecting the rights of service users/patients. Observations and complaints help to improve the services provided continuously and are a sign of interest in the activity and the service offered.

Observations and complaints, submitted non-anonymously on the form available in the facilities by service users/patients or their families, are collected and forwarded to the Medical Director of the relevant centre, who carries out the appropriate checks and addresses any critical issues by taking corrective action where necessary. The person who made the complaint receives a prompt written reply (within a maximum of 15 days) from the relevant contact persons and the Administration.

Questionnaires

The key element in monitoring the quality of the services provided, in all its dimensions, is first and foremost the level of satisfaction of service users and/or their families, which depends on the perceived match or mismatch between expectations and the services offered. Satisfaction is measured by analysing customer satisfaction questionnaires, which service users and/or their families are invited to complete periodically (about once a year, without prejudice to any extraordinary ad hoc checks).

The questionnaires invite the service user/patient or family member to give their views on how the centre/service works, on the staff and on their relationship with the organisation. This tool allows continuous monitoring of the quality perceived by those concerned, and continuous improvement of performance and of the services offered.

Voluntary organisations

Subject to a request to the Medical Directorate, voluntary organisations may be authorised, by signing a protocol, to have access on days, at times, in ways and in spaces defined by the Directorate, so as not to disrupt the activities of the Centres. The request may be submitted to the Medical Directorate at any time by any organisation duly entered in the Regional Register of voluntary organisations and operating in the area.

PART EIGHT

Quality indicators and standards

Quality standards

The Unisan Group's quality management system is a documented system subject to periodic checks to ensure that the system "on paper" and operational reality are consistent with each other and meet the requirements of the applicable regulations.

Implementation of the Service Charter

The commitments made to service users through this Service Charter are constantly monitored through the implementation of the specific protection mechanisms safeguarding the service user/patient referred to above. In particular, each type of survey corresponds to an activity monitoring the statements of the charter.

Locations and contacts

Operational site - Outpatient Clinic ex art. 26 Via Quirino Majorana

Located no more than 300 metres from a public transport stop, the facility is accessible, fully equipped and compliant with current safety, hygiene and other regulations.

Address	Via Quirino Majorana, 145 - 00152 Rome
Opening hours	Monday to Friday 8:00-20:00, Saturday 8:00-14:00
Outpatient (phone/WhatsApp)	+39 375 7913283
Home-based service	+39 375 7912922
Switchboard	+39 06 96032032
PEC (certified email)	unisan@pec.unisan.it
Email	info@unisan.it, coord.majorana@unisan.it, domiciliare.m@unisan.it

Registered and administrative office - Unisan Gruppo

Address	Via del Casale de Merode, 8 - 00147 Rome
Tel.	+39 06 96032032
PEC (certified email)	unisan@pec.unisan.it
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