

LECTURE PRESENTATION

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Health residences: legal aspects

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Clinical and social background

"The HR offers to dependent subjects, elderly and not, with an outcome of physical illnesses, mental or sensory mixed, not treatable at home, an average level of medical, nursing and rehabilitation, accompanied by a high level of protect and hotel assistance, modulated according to the model of care adopted by the Regions and Autonomous Provinces (DPR 14.01.97). The HR are intended to subject self-sufficient, could not be treated at home, affected by geriatric neurological and neuropsychiatric stabilized diseases. Be expected: hospitality permanent relief to the family not exceeding 30 days, of completing education and rehabilitation possible initiatives in other principals of the NHS." Essentially the HR are the practical response to the needs of actual society, more and more elderly, with various care needs that can not be left solely to individual initiative resolvers household. Depending on the provision of care to be paid, social workers and health board must ensure the adequacy of operation by the state of health of the subject admitted, in relation to "obligations of means" business activity, whereas the RSA however, is not a hospital or a nursing home.

Conclusions

Since the HR private structures, under the agreement with the Regional Health Service, operating according to specific rules, and receiving public money in respect of services rendered to citizens, thereby absolving - on behalf of the State - constitutional requirements under Article 32, can only portend a hypothesis of contractual liability in the event of default in the bonds due. Quality first documented in Nursing, where the minimum performance level or base has now increased and qualified for the presence in the so-called "modules" no longer mere performers but by professionals who graduated in Nursing. By providing the best qualified health RSA

(medicalized HR) presence h24 nurses and the doctor working in the daytime, with possible assistance at night and weekend "on call" continuity of care or service or the Emergency and Urgency 118 Service, it is clear how the nursing care becomes - in these operational realities - an expression of the true guarantee of continuity of care and therapeutic. Remains decisive in achieving the overall objectives, the operational integration of all the skills, both in health and social vocation, so that the quality of care may be considered appropriate to the needs of users.

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