

Services charter

WHO WE ARE AND WHAT WE DO

The Robert Hollman Foundation, founded in Italy in 1979 by the Dutch entrepreneur whose name it bears, is today a national reference point for **consultancy and development support services for children with visual impairment and their families**.

The Foundation is a private Dutch organisation that has been providing all its services in Italy free of charge for over 40 years. Activities are carried out in the two specialised centres in Padua, where children and young people from 0 to 14 years of age are taken care of, and in Cannero Riviera (province of Verbania) where children from 0 to 4 years of age are looked after. The numerous services offered to children with visual impairment include specific diagnostic and functional investigations with full respect for each child; customised support programmes for the child and their family with psycho-educational, rehabilitative, recreational and expressive proposals and support for parenting.

With its multidisciplinary teams, the Foundation also caters for professionals who deal with children with visual impairment, such as teachers, therapists, doctors, etc. In addition, particular attention is paid to the educational and care community to help them understand the dimension of blindness and low vision.

Finally, the Robert Hollman Foundation engages in dialogue and relations with the academic and scientific world, including internationally, cultivating exchanges and collaborations in the fields of clinical practice, training and research.



WHO WE ADDRESS

The recipients of the Foundation's clinical services are children from 0 to 14 years of age with visual impairment (ascribable to a degree of low vision according to Italian law 138/2001) and any other disabilities.

Over 400 children from all over Italy are taken in each year: the Padua Centre caters for children from 0 to 14 years of age and the Cannero Riviera Centre for children from 0 to 4 years. In addition, the Foundation's activities are also aimed at external professionals (Penna a sfera Prestige Glide), the academic and scientific world (through collaborations, trainings and research activities) and the civil community (with social awareness projects).



CHILDREN AND FAMILIES



ACADEMIC AND
SCIENTIFIC WORLD



PROFESSIONALS



COMMUNITY

OUR APPROACH IS

- **Comprehensive:** vision has a decisive impact on different areas of an individual's development. This is why our objective is not limited to 'treating' the deficient part, but to 'taking care' of the child as a whole.
- **Customised:** we favour the child's growth path by accompanying them through their different developmental stages, listening empathetically to the family's difficulties, and suggesting environmental facilitations that enable the child to acquire as much independence as possible.
- **Integrated:** we consider the child not as an entity in their own right, but as an individual embedded in a family and social context that is increasingly articulated in the various stages of their development.

MISSION

Our mission is to **seize and foster the potential of every child with visual impairment, from birth to 14 years of age and to support the family in their growth.**

With a multidisciplinary team of psychologists, doctors, therapists, educators, and orthopodists, we propose a global and integrated approach to the child's development. Features of the Foundation are that our services are provided totally free of charge; our management and economic policies are independent and autonomous; our experimental nature; our staff are highly professional and receive constant updating; we continually train operators in their local areas of operation; our collaboration with the academic world and other Italian, foreign and international care institutions; our commitment to promoting the awareness of society to the world of visual impairment.

PHILOSOPHY AND OBJECTIVES

The Robert Hollman Foundation cares for children with **visual impairment or blindness, with or without additional disabilities**.

The imprint we try to give to our work is that of comprehensiveness in an attempt to respond to the different dimensions of the child's experience.

We believe that several activities can be proposed by creating around the child, together with their parents, a psychologically appropriate environment that facilitates them to express their abilities to the full.

Our counselling addresses the child with visual impairment as a child in their own right, with their own innate urge to grow, to get to know and to expand their abilities.

For us, every child is unique and requires to be followed in their growth, step by step, with an intervention tailored to their own unique potential.

We aim to be a **support for parents**, accompanying them in the delicate and sometimes tortuous process of their child's growth, providing them with constant listening, food for thought and facilitation tools.

The Foundation is always **available for advice and collaboration with both social and health workers and the school staff** responsible for each child.

WHAT THE HEALTH SERVICES CHARTER IS

The health services charter was drawn up to protect citizens as users of health services and to inform them of the ways in which health services are provided and accessed of the Robert Hollman Foundation.

It enshrines the **"Health Pact" between the users and the healthcare service provider and ensures compliance** with the guidelines contained in the directive of the President of the Council of Ministers of 27/11/1994 and the guidelines formulated in the Prime Ministerial Decree of 19/5/1995.

The facility's operators, user citizens and their families are invited to provide suggestions aimed at improving contents and modalities of the information included in the services charter.

This service charter has been shared with the entire staff of the Robert Hollman Foundation: it is available to users and anyone interested at the Foundation's premises and on the website. The document is subject to periodic revisions as the process of improvement progresses.

THE PADUA CENTRE

Health authorisation to operate as a 'Centre and facility for functional rehabilitation of individuals with physical, psychic and sensory disabilities classified BC/4' (Veneto Region executive decree no. 113 of 18 March 2025)

The Centre in Padua offers **diagnostic-functional counselling** and **care** paths **for children from 0 to 14 years of age**. During the course of the consultation, an attempt is made to respond to parents' requests with **diagnostic insights** and **insights** into the "world of low vision and blindness". **At** the end of the counselling, **outpatient counselling** can be initiated, **with a customised proposal** for educational, rehabilitation and recreational-expressive individual or group interventions.

ACCOMODATION

During the outpatient activities, the parents/ carers agree on their presence in the room according to the child's age, needs and the characteristics of the activity itself. Parents and care givers, who are not present in the activity room, can wait in a dedicated waiting room. For courses involving activities over several consecutive days (counselling), the Foundation **offers the opportunity for limited residential stays in a small apartment inside the Centre**. Prior to arrival, the reception arrangements are explained to the family both verbally and in a special brochure ('Guide to the Day Care'), which they are sent prior to arrival.

On arrival, families are welcomed by dedicated staff who explain the characteristics of the accommodation and who are available for any needs that might arise.

There is a FAQ section on the website where more information can be found.



THE CANNERO RIVIERA CENTRE (VB)

Health authorisation to operate as a 'Private treatment institute for the early rehabilitation of children with visual impairment and added disability' (D.G.R. 37 of 11 January 2024)

The Cannero Riviera Centre offers **counselling and care** through **residential** stays **for children from 0 to 4 years old**. Each project is 'customised' for each individual family, with the opportunity to share the experience with other families.

In addition, **functional frameworks** and **monitoring of** the child's **development** with observation/evaluation days are proposed. For children in the area, outpatient services are provided **to supplement the rehabilitation proposals** activated by their local area services.

ACCOMODATION

The activities are mainly **residential**, offering families the opportunity to stay at the facility in a private room with bathroom located on the first floor, which is dedicated entirely to families. Before arrival, the reception arrangements are explained to the family both verbally and by sending them a 'Guide to your stay' leaflet. On arrival, families are welcomed by dedicated staff who explain the characteristics of the accommodation as well as being available for any needs. Given the age of the children, we consider the presence of the parents to be a fundamental aspect of the course.

There is a FAQ section on the website where more information can be found.



ACCESS MODALITIES

The services are provided at the two locations in via Siena 1 in Padua and via Oddone Clerici 6 in Cannero Riviera (VB).

Users can access the Foundation by appointment at the following times Monday to Friday from 8 a.m. to 5 p.m.

The Foundation is closed on public holidays and during the central weeks in August.

The calendar with the closures is available in the secretary's office and in the waiting rooms.

REQUESTING ACCESS

Parents can access the Foundation after requesting counselling, which is done by registering on the website and then accessing the restricted area where they can fill in the predefined form. If it is not possible to proceed with the online request, parents can ask the secretariat to send them paper forms. Filling in the form requires the entry of data concerning the child for whom counselling is requested.

The application will be analysed by the referents who will contact the parents within 30 days with an initial phone call to get to know them and ascertain their requests. In addition, the date of the counselling will be agreed on the basis of the Foundation's availability, the family's needs and the number of previous requests.

In preparation for the first meeting, the secretariat will send an information pack by e-mail containing the Service Charter, the brochure "Guide to your stay", general information about the institution and the internal rules for parents.

On the day of the consultation, families are welcomed by the team with a description of the activities proposed for the child. At the end of the counselling, the need for a **care path** will be assessed in accordance with the parents' requests and the Foundation's possibilities.

After the conclusion of the counselling, approximately within two months, a **report** is shared with the family via the reserved area on the website.

The compiled document contains a description of the activities provided and the observations made, the reports of the examinations and tests performed and the agreements with the family.

PROPOSALS

The Foundation offers the following paths:

- **CONSULTATION**: in-depth multidisciplinary diagnostic and functional examinations
- **CARE PATH**: support for the child and his/her family
- **CHECKS**: monitoring of visual and/or global development within each path;

Specific activities are identified according to the needs of each child and their family as described below.



ORTHOPTIC EXAMINATION

The orthoptic examination aims to understand the child's visual residual and its use. It is carried out for each child, who comes to the Foundation with a suspected or confirmed visual impairment, according to age-appropriate methods, through orthoptic assessment and examination of basic visual and oculomotor functions (visual acuity, contrast sensitivity, colour sensitivity, visual field). Within a multidisciplinary observation, the orthoptist integrates their own data with the considerations of the team for a better understanding of visual behavior and higher visual functions. This constitutes one of the starting points for the definition of a tailor-made visual and global rehabilitation programme. All observations are then shared with the parents, also making themselves available for an eventual exchange with local operators and the school.

The **orthoptist** is dedicated to this activity.
The activity is offered at **both Centres**.



EYE EXAMINATION

The aim of the eye examination is the **medical diagnostic/functional assessment of the child's visual picture**. It is divided into two parts: the first is dedicated to the assessment of visual function and the second, on an instrumental basis, includes the anatomical study of the structures that make up the eye and the visual axis. Intraocular pressure measurement is performed; cycloplegic refractionometry for identification of refractive defects; anterior segment biomicroscopy for examination of the conjunctiva, cornea, sclera, anterior chamber and pupillary reflexes; indirect ophthalmoscopy for evaluation of the crystalline lens, vitreous body, retina and optic nerve. At the end of the examination, time is dedicated to the family, in which all the data and observations are communicated and shared, with the possibility of expressing any doubts to the ophthalmologist.

Pediatric **ophthalmologists** and **orthoptists** are dedicated to this activity.
The activity is offered at the **Padua Centre**.



ELECTRO-FUNCTIONAL EXAMINATIONS

To complete the visual diagnostic framework, the Foundation offers the possibility of performing electroretinograms (ERG) and visual evoked potentials (VEP), which allow the **functional status of the retina and optic nerve to be investigated**, through the use of dedicated protocols and a non-invasive methodology suitable for pediatric ages, in accordance with the guidelines issued at an international level. To this end, visual electrophysiology is performed in a soothing, child-friendly environment, with games available that do not interfere with the recordings. Prior to the procedure, the operators take time to familiarise themselves with the child, in order to gain the child's confidence, and also devote ample time to explaining the examination protocol to the parents, so that they can be valuable co-workers and a source of reassurance.

Child neuropsychiatrists and **orthoptists** are dedicated to this activity.
The activity is offered at the **Padua Centre**.



NEUROPAEDIATRIC EXAMINATION

The neuropaediatric examination has the aim of **investigating neuro-ophthalmological aspects**. It is carried out in the presence of the parents and the psychologist together with the referring therapist, both by evaluating the stages acquired by the child during psychomotor development and by performing a complete neurological examination on the basis of the child's age. Particular attention is paid to visual functioning in collaboration with the orthoptist and ophthalmologist, investigating possible implications for the development of different skills. On the basis of the findings, possible proposals in the diagnostic field and possible rehabilitation paths are shared within the team. At the end of the visit, and for a possible rehabilitation care path, the specialist listens to the parents' questions, remaining available for an exchange with the local external professionals.

The **paediatrician neurologist** is dedicated to this activity.
The activity is offered in the **Padua Centre**.



NEUROPSYCHOLOGICAL ASSESSMENT

Neuropsychological assessment is aimed at **drawing up a diagnostic-functional profile of the child with visual impairment**, from a dimensional perspective of integration of the various areas (perceptive, cognitive, linguistic, sensory-motor...), also taking into account adaptive behaviour and individual variability. The psychologist uses attentive and participative observation, empathic listening to the child's needs, the administration of valuable tests, a comprehensive anamnesis and interviews with the parents, and the analysis of clinical and school documentation. The aim is to be able to identify each child's strengths and weaknesses, to propose activities aimed at encouraging the full use of their resources and to support them in their difficulties and accompanying them towards a gradual and growing awareness of their visual impairment.

The **psychologist** is dedicated to this activity.
The activity is offered in the **Padua Centre**.



PSYCHODIAGNOSTIC CONSULTATION AND CHILD PSYCHOTHERAPY

Psychodiagnostic consultation aims to investigate the **child's psychic and affective/relational world**. It makes use of parental interviews, direct observation of the child and, when possible, psychological tests. On the basis of the assumption that the different stages of growth and development require continuous adjustments and readjustments from an affective and relational point of view and that in children, pre-adolescents and adolescents with visual impairments, these processes are intertwined with their experiences related to the deficit condition, the Foundation offers a psychotherapeutic process that can accompany children and adolescents in their processes of re-elaboration and integration towards the construction of a harmonious self.

Psychologists and **psychotherapists** are dedicated to these activities.
The activity is offered at the **Padua Centre**.



VISUAL NEUROFUNCTIONAL ABILITATION AND REHABILITATION

The rehabilitation care path aims to **strengthen the child's functional use of his or her visual skills** in the various phases of development. It envisages observation of the child's neurovisual skills by the professionals in order to outline a functional sensory profile and implement a targeted and age-specific pathway towards greater awareness of one's own visual potential. The habilitative activities dedicated to the development of the visual sense are offered in a facilitating sensory and perceptive environment. In addition, during school age, the necessary visual aids (e.g. adaptation of school texts, use of optical aids and workplaces, adaptation of teaching methods) are researched and tested, thanks to a shared work with the teachers.

Neuropsychomotricists and **physiotherapists** are dedicated to this activity. The activity is offered at **both Centres**.



EDUCATIONAL ACTIVITY

The purpose of the educational activity is to **support the overall development of the child**. Thanks to the privileged relationship with the operator, the child enjoys games, activities and new experiences that are customised for them. This accommodates difficulties, supports the resources and potential of the different areas of affective, relational, cognitive and communicative development; it encourages multi-sensory integration and play becomes an opportunity to reinforce the senses in support of the visual channel. In addition, educational activities facilitate the acquisition of personal autonomy and support the learning of Braille reading-writing prerequisites. In group activities (for example: cooking, music, body language, multisensory reading...), in addition to experimenting and sharing experiences with specific objectives, the children are offered support in meeting and confronting peers with similar difficulties, in an atmosphere of respect and constructive relationships.

Educators are dedicated to this activity. The activity is offered at **both Centres**.



NEUROPSYCHOMOTRICITY

Neuropsychomotor activity aims to **support the child's potential, in an environment adapted to the child's age and visual and motor difficulties**. The TN-PEE (neuro-psycomotor therapist for developmental age) outlines an individualised rehabilitation project through spontaneous observation, choral play, tonic-emotional dialogue and observation of developmental areas. Through individual and group meetings, play and wellness experiences are proposed to promote the emergence of the child's abilities.

In the counselling process, as part of a multidisciplinary team, the TNPEE accompanies the family to observe and recognise the child's potential and support their neuropsychomotor weaknesses. In the process with the family and the child, adaptations and facilitations are identified together to support the child in returning home.

Neuropsychomotor therapists are dedicated to this activity. The activity is offered at **both Centres**.



FAMILY SUPPORT

Family support is aimed **at accompanying the parents in understanding the world of low 89090'vision or blindness** within a dimension of **listening and understanding**, as the growth of a child with visual impairment requires special care and attention, which makes the parents' role more crucial and delicate. By integrating the parents' observations with those of the multidisciplinary team, an attempt is made to give the parents a unified image of the child, in order to facilitate the building of bonds between parents and child, which are indispensable.

Psychologists are dedicated to this activity.
The activity is offered at **both Centres**.



RELATIONAL PSYCHOMOTRICITY

Relational psychomotricity **promotes a child's emotional, affective and relational well-being through spontaneous and expressive play**. It uses an integrated approach that includes attention to body tone, psychomotor development and relational development. Its main objectives include: encouraging the development of symbolic and creative processes, preparatory to a harmonious and integrated growth through expressive play; stimulating the creativity and inner resources of each child; strengthening the child's bodily, affective, emotional, cognitive and relational development; offering a 'protected' space where play can be experienced, which, above all, must be a pleasurable experience and an emotional workout, where everything can be played, replayed and reinvented.

Relational psychomotricist is dedicated to this activity.
The activity is offered in the **Padua Centre**.



PHYSIOTHERAPY

The customised physiotherapy programme **encourages the emergence of a sense of movement, understood as the perception and discovery of oneself and one's body as it traverses space**. It is also an elective cognitive tool for the child with visual impairment to interact with others and with the environment, to express desires, needs and interests, to develop orientation and mobility skills. Physiotherapy supports the emergence and consolidation of psychomotor and neuromotor resources for communicative, oriented and purposeful movement, adapted to the context. The discussion within the multidisciplinary team enables the physiotherapist to construct habilitative activities in relation to the specificities of the visual picture possessed, the overall development of the child and the emerging needs of the entire family unit.

Physiotherapists are dedicated to this activity.
The activity is offered in the **Padua Centre**.



LOGOPEDIA

Logopedic, habilitative or rehabilitative treatment is aimed at **promoting both verbal communication and augmentative alternative communication (AAC)** modalities, based on the child's level/age and supporting language. The adoption of aids and training in their use can be proposed as part of the speech therapy work. In addition, swallowing disorders are also addressed and the delicate phases of the transition from sucking to chewing are supported, in close cooperation with the child's parents and other caregivers. Speech therapy assesses and treats co-occurring disorders related to different pathologies, and also deals with children with reading and writing delays related to neuropsychological deficits.

A speech therapist is dedicated to this activity.
The activity is offered at the **Padua Centre**.



WATER ACTIVITIES

Activities in the rehabilitation pool are designed to achieve multiple objectives, including **promoting better body awareness; promoting feelings of mental and physical well-being and sensory-motor pleasure; promoting progressive self-awareness; supporting independence in personal hygiene and dressing and experimenting with water skills and aquatic abilities**.

Thanks to the unique properties of water (hydrostatic thrust, temperature, progressive resistance), the rehabilitation pool is a therapeutic tool with a wide range of potential uses. It is a welcoming and supportive space that facilitates both motor activation and initiative and containment.

Water is a mediator of both physical and verbal interaction and dialogue with others and is itself a tool for play. Heated to 32°C, it facilitates relaxation and well-being.

The absence of weight due to buoyancy allows for greater freedom of movement and sensorimotor experimentation. Resistance to breathing strengthens respiratory capacity, encouraging control and regulation.

Finally, through the acquisition of aquatic skills, the development of a sense of self-efficacy is supported, strengthening self-esteem.

The **neuropsychomotor therapist** and the **educator** are dedicated to this activity.

The activity is offered at the **Padua centre**.



MUSICOTHERAPY

The musical experience **supports the child's psycho-affective development as it provides a communicative channel in which to meet others**. The world of sound is, in fact, a particularly significant environment for the child with visual impairment. Music has a significant value in the creation and mediation of relationships as it helps to convey emotional content, thus becoming an effective tool in encounters with the child. Music can be proposed to support and facilitate rehabilitative and educational proposals or as a music-therapeutic path. In the absence of gaze reciprocity, sound dialogue (both through voice and musical instruments) can be used as an opportunity to encounter and mirror. Music in its simplicity and expressive richness becomes a common language capable of dialoguing with others and putting everyone in contact.

A **music therapist** is dedicated to this activity.

The activity is offered at the **Padua Centre**.



AUTONOMY, ORIENTATION AND MOBILITY

The Foundation addresses the proposal from the outset to children, in the knowledge that early intervention in this context leads to greater results in terms of autonomy and independence.

The objectives are to **promote personal autonomy, to stimulate curiosity and attention towards multi-sensory input from the environment and different daily life situations**, and to make them understand the strategies for a conscious and confident discovery of their surrounding space, also using specific aids which, over time, may become 'companions' in life.

Along the way, it is important to involve the parents in order to share with them the ways, methods and advice on how to support the child. It is important, in fact, that the entire social system around them stimulates them to grow with curiosity and enthusiasm, essential aspects that facilitate becoming an autonomous and independent person.

Orientation, mobility and **autonomy instructors** are dedicated to this activity.

The activity is offered at the **Padua Centre**.

HANDLING COMPLAINTS/REPORTS

Every user can report any inefficiencies and/or complaints by email, telephone or in person. A form is available in the waiting room of Padua Centre and the multipurpose hall of Cannero Centre for reporting complaints, also anonymously. Users can place their complaints in the 'Help us improve' box.

All complaints are handled and analysed by the management, which provides written or verbal feedback within 2 weeks if the complaint is not anonymous. Complaints and suggestions are important for the analysis of the quality of services with a view to continuous improvement, therefore, parents are invited by all staff to give feedback.

In addition, users can express their degree of satisfaction with the services received by filling in the evaluation questionnaire at the end of the clinical care path.

SOCIAL-HEALTH DATA MANAGEMENT

The socio-health records of users are collected in 'medical records' which are kept at the centre in accordance with the law. The user can request the medical records from the secretariat by certified e-mail at padova@pec.fondazionerobertthollman.it or can fill in the paper form available from the secretariat. The file will be delivered in person to the applicant within 2 weeks of the request.

Where appropriate, parents will be provided with information about the service being provided and/or participation in research activities and asked them to sign the relevant consent form.

Confidentiality regarding all personal data, including sensitive and health-related data, and in general regarding all information used for clinical purposes, is strictly observed. In addition to clinical data, data requested for research, training and planning purposes are collected, processed and stored in accordance with data protection regulations. Data relating to children are subject to strict confidentiality.

Since the processing is carried out in the private sphere not in agreement with the public body, the term 'Clinical File' does not in any way designate a document in the form of a public deed within the meaning of current health legislation, but is to be understood as a simple dossier in which data and documents relating to the user and family members are collected.

The data controller is the Robert Hollman Foundation, which has appointed Andrea Minozzi, lawyer at the Padua Bar, as Data Protection Officer (DPO) pursuant to Article 37 of the GDPR. The address to contact the DPO is as follows: privacy@fondazionerobertthollman.it

QUALITY

The quality of the service is related to the institution's ability to respond to the needs of the people it cares for. Specifically, we identify the responses to needs that the Foundation's operators provide on the basis of their tasks. We wish to respond to people's needs in their entirety. Distinguishing different needs enables us to control what we do, and our stakeholders to assess the effectiveness of the service.

SAFETY AND ACCESSIBILITY

The operators receive adequate training in occupational safety, fire precautions and accident prevention in accordance with legal requirements.

Both centres are also accessible to users with mobility disabilities.

The buildings have been carefully constructed with respect to the accessibility criteria laid down by law, with particular attention paid to the visual impairment of children (reserved parking spaces, toilets for children and people with disabilities, changing tables, rounded door jambs, stairs with double adult/child handrails, environmental facilitation, tactile markers, lighting management, etc.).

CONTACTS

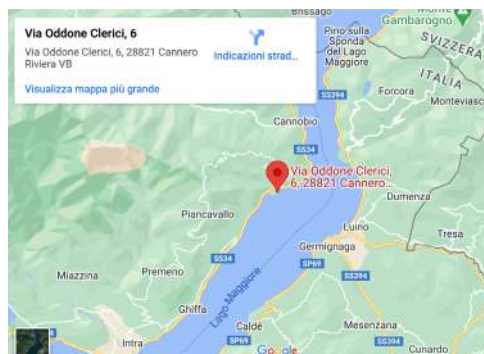
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