SERVICE CHARTER

PARSEC Harm Reduction Day Centre

DROP-IN

INSTITUTIONAL ACCREDITATION AND FUNDING ARRANGEMENTS

The service is funded by ASL Roma 1 and authorised in the Lazio Region under Regional Determination G05124. With reference to Resolution 607/25 and subsequent additions and amendments, the Day Centre is currently undergoing accreditation with the Regional Health Service.

ORGANISATIONAL STRUCTURE

Legal Representative, Parsec Cooperative: Dr Maura Muneretto tel. 06 86209991
Medical Director: Dr Barbara Guadagni tel. 339 8727697
Administrative Manager: Dr Paolo Cassetta tel. 340 2729437
The Day Centre works through a shared and integrated approach and draws on the professional expertise of psychotherapists, psychologists, doctors, professional educators and social and healthcare workers.

Updated on 06/08/2026

The Legal Representative

PARSEC COOP. SOCIALE ar.l.
Viale Jonio, 331 - 00141 Roma
Tel. 06.86.20.99.91 - Fax 06.86.11.067
C.F. e P. IVA 05127301009

1 NAME OF THE SERVICE

Harm Reduction Day Centre – Drop-In – Parsec

The Drop-In Day Centre is an open and free service. It is intended for people who use psychoactive substances, with the aim of reducing health and social risks, preventing infections, connecting people with local services, promoting access to health rights and developing individual pathways.

It is a place for:

- welcoming and reception
- listening
- protection
- guidance towards services

2. MANAGING ORGANISATION AND CONTACT DETAILS

Managing organisation	Parsec Cooperativa Sociale
Commissioning / funding body	Lazio Region / ASL Roma 1
Managing organisation address	Viale Jonio 331, 00141 Rome
Service telephone	3477385870
E-mail	info@cooperativaparsec.it
Service started	1996

3. TARGET GROUP

The service is intended for people who use substances and who experience social, health or economic fragility and are therefore in vulnerable situations.

Access is free, voluntary and non-discriminatory. Privacy is protected.

4. PURPOSE AND OBJECTIVES

The Centre provides essential services and daily support:

Reception and rest areas

- protected and non-judgemental space
- possibility to sit and spend time
- safe and private environment
- food supplies

Hygiene services

- shower
- toilet
- personal hygiene

Laundry

- possibility to wash personal clothing
- support with laundry management

Guidance and counselling

- individual listening
- information on health and social services
- accompaniment to local services
- support in managing urgent needs

5. AREAS OF INTERVENTION

The service operates specifically within Rome Municipality III.

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6. OPERATING METHODS

The service operates through:

6.1 Reception

The Centre is open to anyone in need of support, through a non-judgemental approach and the development of a relationship of trust.

6.2 Harm reduction

- Distribution of sterile materials for safer use (syringes, injecting kits, smoking materials where provided)
- Education on lower-risk consumption practices
- Information on overdose prevention and emergency management

6.3 Prevention and health

- Information on transmissible infections
- Guidance towards HIV/HCV testing and other screening
- Information on health services and free access to care

6.4 Guidance towards services

- Referral and accompaniment to local Ser.D addiction services
- Connection with social services, shelters and social-care street outreach units
- Support in accessing documents and services

6.5 Low-threshold support

- Distribution of food supplies
- Laundry service
- Personal hygiene service
- Active listening and relational support
- Information on social services and rights
- Development of individual pathways

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7. ACCESS ARRANGEMENTS

Access to the service is voluntary and free, subject to the capacity limits of the premises.

- no appointment is required
- direct access during opening hours
- no identification document is required for entry (unless otherwise provided by internal or regional regulations)

8. METHODOLOGICAL PRINCIPLES

- Low-threshold access
- Non-judgement and respect for the person
- Centrality of the relationship
- Harm reduction as a health and social approach
- Integration with the public service network
- Protection of dignity and rights

9. OPENING HOURS

The Centre is open: Monday to Saturday, from 9:00 a.m. to 3:00 p.m.

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10. TOOLS AND MATERIALS

- Sterile kits for safer use
- Prophylaxis supplies (disinfectants, gauze, basic medical materials)
- Information materials
- Hygiene kits and essential goods
- Overdose prevention devices (where provided for by protocols)

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11. MULTIPROFESSIONAL TEAM

The service team includes:

- A Medical Director
- A doctor
- Psychologists
- Professional educators
- Social workers
- Social and healthcare workers (OSS)
- Social and cultural mediators (where necessary)

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12. LOCAL PARTNERSHIPS

The service works in a network with:

- Local Ser.D addiction services
- Municipal social services
- ASL healthcare facilities
- Third-sector organisations
- Homeless services
- Social and health emergency networks

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13. MONITORING AND EVALUATION

The service provides for:

- Quantitative monitoring of contacts
- Monitoring of materials distributed
- Qualitative evaluation of relational outcomes
- Tracking of referrals to services
- Periodic reports for the ASL and funding bodies
- Data reporting to the Regional OER System

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14. COMPLAINTS AND SERVICE FAILURES

The procedure for managing complaints and service failures provides for the report to be handled as a non-conformity.
Procedure: Each service has dedicated forms for collecting reports and a box in which reports may be deposited. Reports may also be made at the dedicated desk.
Once the reports, information about the incident, the details of the complainant/person reporting the service failure and, where available, a telephone number have been collected, the Quality Manager, involving the Service Manager, will initiate the non-conformity management process (as defined in the dedicated management procedure in the Quality Manual). An analysis of the case is then carried out immediately and corrective action is initiated to resolve the problem. The effectiveness of the corrective actions taken is subsequently verified, and corrective action aimed at preventing a similar problem from occurring again is planned.

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15. REFERENCES

For further information, please refer to the Methodological Report, the Regulations and the Charter of Rights.