

	<b>CHARTER OF SERVICES</b> 	<b>MOD 55 E</b>	
		Rev 2 data 07/08/23	Pagina 1 di 13

**COOPERATIVA SOCIALE AGRICOLA TERRE UMBRE**



**"Open Farms" Psychiatric Semi-Residential Structure aimed at young people / adults  
with autism spectrum disorder - SRP**

ReV	Data	Causale	Redazione	Verifica	Approvazione	FIRMA
0	02/01/23	EMISSION	SECTOR MANAGER	DIR SAN	HEALT DIRECTOR	
1	02/05/23	EDIT	SECTOR MANAGER	DIR SAN	HEALT DIRECTOR	
2	07/08/23	EDIT	SECTOR MANAGER	DIR SAN	HEALT DIRECTOR	

	<b>CHARTER OF SERVICES</b> 	<b>MOD 55 E</b>	
		Rev 2 data 07/08/23	Pagina 2 di 13

## Premise

With a view to building responses to community emergencies, Terre Umbre has promoted actions for an urgent need such as defining intervention actions for young people/adults through the creation of a Semi-residential Psychiatric Structure called "Open Farms". There are some experiences in Italy that have already started enabling courses for autistic young people/adults with Social Agriculture, one of these is the experience of the La Semente Day Center, managed by ANGSA Umbria (National Association of Parents with Autistic Subjects), and the other is the Conca D'oro Social Farm in Bassano del Grappa and it is precisely from these two realities that Terre Umbre creates its project. Addressing the young/adult range is particularly important: they are kids who are transitioning towards an adult world that has more complex rules and social roles than those of the world of childhood. For this reason, the project aims to create paths that allow young people to acquire skills that facilitate the construction of an adult identity and of least possible dependence on the other. Hence the proposal to carry out support and reception actions where agricultural activity and above all, the relationship with plants and animals, can be an effective tool for defining therapeutic actions. Guests will be involved both in production-related activities and in therapeutic activities.

The structure is in possession of the requisites foreseen by the D.P.R. 14/01/1997 and by the "Regional Regulation" of 12/04/2022 No. 2 "Discipline on the subject of additional requirements and classification of health and social-health structures of extra-hospital territorial assistance" and authorized by the Region of Umbria to be exercised with Executive Resolution no. 8246 of 11.08.2022.

The Structure has adopted the following Charter of Services which is inspired by the fundamental principles that regulate the provision of public services at national and community level Directive of the Council of Ministers of 27.01.1994 in order to guarantee the transparency of its actions, the protection of people and the quality of the services provided.

The Charter of Services is one of the tools necessary to give citizens clear information on the activities of the Structure and to make people and their families involved in the treatment process. The Charter of Services describes and defines the meaning and purpose of the Psychiatric Therapeutic Rehabilitation Residential Structure sets out its objectives, explains the intervention methodologies and tools, establishes the responsibilities and duties of the operators employed, describes the Service, offering useful information on how access it, on the methods of its delivery and on the guaranteed minimum levels of quality, effectiveness and efficiency. The objective of the Service Charter is to inform the people employed, their families, public and private social operators, and any other subject involved in the process of providing the Service, and at the same time allow them to access the Services with greater awareness offered

	<b>CHARTER OF SERVICES</b> 	<b>MOD 55 E</b>	
		Rev 2 data 07/08/23	Pagina 3 di 13

### ***Validity of the Charter of Services***

This charter is available to all interested citizens and institutions. It is considered valid until further revision and in the event of changes, the Cooperative will provide an updated and revised copy.

### ***Who We Are***

Terre Umbre is an Agricultural Social Cooperative, mixed A and B, which was founded in 2014 with the aim of engaging in Social Agriculture as an opportunity to develop therapeutic, rehabilitative, educational and social integration paths for vulnerable and fragile people, enhancing at the same time the agricultural and environmental resources of the territory.

### ***Vision e Mission***

The "Open Farms" Psychiatric Semi-Residential Structure stands as a resource capable of offering the possibility of carrying out care experiences and extra-family life dimensions useful for increasing the well-being of the person and consequently of the nucleus of origin.

The experiential interventions proposed in various dimensions (informal contexts, territorial contexts, structured contexts and mediated by educators) have the aim of promoting the discovery and awareness of the potential of the inserted person and to increase their autonomy, skills, self-esteem, social integration and well-being. By operating in a network with other bodies and institutions such as specialist health services, we intend to guarantee a "global and continuous management" of the young person with autism spectrum disorder and offer constant support and support to families.

### ***Ethical Code***

The Residential Structure adopts the following principles:

- **Centrality of the person**: respect for individual differences and the preparation of individualized projects that take into account the needs of each individual user are guaranteed.
- **Equality**: the rules established for the provision of the service are the same for all users, regardless of gender, ethnicity, religion and political opinions.
- **Impartiality**: any form of favoritism towards certain subjects is prohibited and the criteria of objectivity, justice and impartiality are applied.
- **Participation**: the structure guarantees and promotes the participation of families in the processes of improving the quality of services, welcoming suggestions, requests, complaints in a positive way and organizing moments of reflection and analysis.
- **Continuity**: the provision of the service is continuous and regular and the activities are managed without interruptions with respect to the provisions established by current legislation.

	<b>CHARTER OF SERVICES</b> 	<b>MOD 55 E</b>	
		Rev 2 data 07/08/23	Pagina 4 di 13

- **Effectiveness and efficiency:** the Structure undertakes to pursue the objective of continuous improvement of the efficiency and effectiveness of the Service by carefully evaluating and comparing resources used, results achieved and pre-established objectives in order to then adopt the most suitable solutions for achieving this goal.
- **Confidentiality:** the Structure, in accordance with the provisions of the Code regarding the protection of personal data (Legislative Decree No. 196 of 30 June 2003), adopts a set of technical, organisational, logistic and procedural privacy security measures. The procedures adopted are intended to minimize the risk of destruction/loss, even accidental, of the data itself, and to avoid unauthorized access or treatment that is not permitted or does not comply with the purposes of the collection.

#### **Location and description of the structure**

The structure is located in Strada S. Maria del Caso n°18, Municipality of Terni in the rural context of Valnerina, about 20 min. from the city center with a large area of relevance consisting of 5 hectares of agricultural land

The structure is characterized by a careful design of accessibility, understood not only as architectural accessibility, but as an opening "to the outside"; a pleasant, welcoming and stimulating place not only for users and operators, but also for the local community context (citizens, families, associations, etc.).

The semi-residential module is for 12 people and is made up of an entrance/sales point, a dining room, spaces for laboratories, bathrooms equipped for the disabled, a doctor's office, an interview room and a meeting room, a dressing room and spaces for the staff, agricultural areas and dedicated outdoor green spaces.

The structure is surrounded by an agricultural area consisting of cultivated land, laboratory premises for the transformation of agricultural products and product sales area, warehouses for storing equipment, outdoor spaces for socializing; so as to promote the inclusion of guests with autism in the activities of the social farm and create the real conditions of inclusion in the social context of life to favor the full realization of a new community welfare.

#### **Structural Features**

Among the main design guidelines, elements of particular attention have been identified, such as: Geometry of the intervention. The newly built spatial structure, orderly and understandable, is built on one floor only to make it easier and more usable, with an intervention guided by clarity and simplicity of both the forms and the internal distribution system. Particular emphasis has been given to the curved lines both in the structural part and in the furnishings.

	<p style="text-align: center;"><b>CHARTER OF SERVICES</b> </p>	<b>MOD 55 E</b>	
		Rev 2 data 07/08/23	Pagina 5 di 13

Lighting. Large windows have been created and internal lighting solutions chosen to avoid direct light precisely because daylight, solar and diffused light does not dazzle, avoids reverberations and sensory excitement.

Microclimatic well-being. An underfloor heating system was created, in order to guarantee the homogeneous diffusion of heat.

Acoustics. the walls are covered with sound-absorbing panels so as to avoid excessive noise and sounds that are sources of discomfort and annoyance.

Color. The walls and floors are soft and uniform in colour. The various environments are colored differently so that the associated color can indicate the function and be easily recognizable.

Flooring. A rubber floor was used on the ground, which is comfortable to walk on, antistatic, highly resistant to fire with excellent sound absorption and anti-slip properties.

Furnishings. The furnishings have curved lines and are functional, resistant and fireproof.

Agricultural area. It consists of cultivated land, agricultural product processing workshops, product sales area, farm.

### **Recipients**

The project intends to promote the development of individual potential and autonomy of 12 people aged between 18 and 26, affected by pervasive developmental disorder and/or autism, through a semi-residential habilitation intervention which, as defined by the DSM-V, require minimal to substantial support in carrying out activities of daily living. (Level 1 – 2 of interference in person's functioning).

In collaboration with the Child Neuropsychiatry Service of the AUSL Umbria n. 2, adolescent users (16-18 years) may be included on the basis of personalized therapeutic-enabling pathways. The project intends to create paths that allow young people with autism to acquire skills that facilitate the construction of an adult identity and of least possible dependence on the other.

### **Center opening and closing time**

The Center operates on an annual basis, excluding public holidays, from Monday to Friday from 8.30 to 19.00 and on Saturday from 8.30 to 13.00. Within these time slots each person will have a personalized timetable (for a maximum of 8 hours), established on the basis of the project which is agreed with the sending Specialist Services.

### **Internal Stakeholders**

Worker Members, Employees, Collaborators, Consultants, Volunteer Members, Trainees, Civil Service Volunteers.

	<b>CHARTER OF SERVICES</b> 	<b>MOD 55 E</b>	
		Rev 2 data 07/08/23	Pagina 6 di 13

### External Stakeholders

Usl Umbria 2, Municipality of Terni and area 10, Angsa Onlus Association, UNASAM Association, Social Promotion Associations, Polisportiva Baraonda, ANPIS Umbria and national ANPIS (National Association of Polisports for Social Inclusion), Noità Association, Lorella Rossi Association, Aladino Association , ALIS Social Cooperative, Local Social Cooperatives, Legambiente Umbria Aps, Agricultural enterprises, University of Tuscia and University of Perugia \_ Faculty of Agriculture, Coldiretti Terni, UeCoop Umbria, Confcooperative Umbria, Ass. Conca d'Ora Onlus - Bassano del Grappa (VI), Acli Provinciale Perugia, Ass. Active Citizenship, Ass. ADIC Umbria, Ass. Arci Solidarietà Terni, Citizen Defense Movement, Ass. Arci Provincial Committee Terni, Court of Terni for works of public utility pursuant to art. 2 of the Ministerial Decree 26.03.01, Uepe, Universities and Schools for post-graduate and pre-graduate training and orientation, Universal Civil Service. Volunteer, cultural, sporting, environmental associations, schools of all levels, foundations and parishes.

### Objective

The primary objective is to enable and increase the autonomy of people with ASD by guaranteeing them an industrious environment where they can carry out activities useful for achieving the personal skills of adult life. Specifically, through individualized and personalized paths we mean:

- Encourage the enhancement of the skills and resources possessed by the young person with ASD for the realization of an adult life project, which also provides for the sharing of spaces with third parties
- Support and involve family members in building thoughts on the possible future for their child
- Guarantee relational continuity through the stable presence of operators, who offer support in the various activities of daily life
- Collaborate with the local services, with the support networks (aggregative, work ...) present in the area in the construction of a job placement path
- Structuring training and operational courses for the acquisition of agricultural skills

### Intervention Methodology

The structure operates in the awareness of the priority importance of all aspects related to establishing a meaningful relationship with the young person. All the rehabilitation interventions aimed at bringing out all the potential of the young person are grafted onto this relational platform. The interventions are in fact characterized as interventions centered on the person, implemented to encourage his free expression, his initiative and his participation, and where the environment, as a privileged place of interaction and knowledge, and those who work there, take on a therapeutic value. Our aim is to promote, with interventions that respect the principles of

	<b>CHARTER OF SERVICES</b> 	<b>MOD 55 E</b>	
		Rev 2 data 07/08/23	Pagina 7 di 13

timeliness, continuity, intensity, multidisciplinary, a better quality of life for the young person and his family. Our intervention model has a holistic character, as we address the young person in his physical, mental, emotional, communicative, relational and ecological whole, as the family, the environmental and social context are involved.

### **Taking charge – Access criteria**

The request for inclusion in the Semi-residential Structure is made by the Regional or National Specialist Services.

The doctor of the Center or of the Department of Mental Health presents a clinical report of the person to be inserted complete with anamnesis to the Medical Director and to the Psychiatrist of the Structure.

The Medical Director and the Psychiatrist, on the basis of the clinical information acquired, discuss with the reference therapist who treats the requesting person for an initial assessment regarding the compatibility with the group of guests already present in the Community. Once the opportunity has been assessed, the Medical Director will involve the multidisciplinary team in the evaluation of the request received. The PTI (rehabilitation therapeutic plan) formulated by the sending service following the request to take charge will be examined with the same team. After the formalization of the given availability, it will be possible to organize meetings with the person concerned and his/her family at the facility. The objective of these visits is to allow confirmation of the clinical picture outlined and to allow the person to express their own opinion of adherence to the proposed project.

After entering the Structure, a month of observation is foreseen to evaluate the skill levels and the requisites requested in the PTI sent by the service. Entry requires:- the favorable opinion of the Referent of the Referring Service, of the Medical Director and of the Psychiatrist of the Structure;

- the expense commitment by the sending service;
- the elaboration of an individual and multidisciplinary project agreed between the user, his family, the team of the referring service, the team of the structure;
- the construction of a collaboration network that sees the various principals involved in constant communication with each other (structure staff, ASL Representatives, Sending Service, etc.);
- the evaluation of the wishes and expectations of the person to be inserted;
- assessment of the compatibility of the person to be included with the group already present

Waiting lists: Waiting times to be welcomed into the structure depend on the availability of places and the relative possibility of carrying out/guaranteeing all the necessary procedures/treatments in harmony with the sending service.

	<b>CHARTER OF SERVICES</b> 	<b>MOD 55 E</b>	
		Rev 2 data 07/08/23	Pagina 8 di 13

### Observation

Observation is a key aspect of the operational methodology and arises both in the person-educator and educator-workgroup interaction.

The privileged times and places of observation concern:

- monthly observation, an initial period of 1 month in which the person experiences the activities envisaged by the Project in the context of the structure, preparatory to the possibility of effective integration,
- a period of a further 2 months in which skills are assessed in a more detailed way to define the objectives of the Personalized Therapeutic Rehabilitation Project (PTRP) and the consequent operational strategies.
- six-monthly observations to verify and, if necessary, recalibrate the PTRP objectives
- ongoing observations, during coordination meetings, to try to identify the causes and hypothesize strategies in the event of a crisis or impasse, or positive evolutions.
- annual observations to verify the skills and competences acquired and to reprogram the objectives for the progressively developing Personalized Therapeutic Rehabilitation Project (PTRP).

### Personalized Rehabilitation Therapeutic Project (PTRP)

At the end of the observation period, the multidisciplinary team (Health Director, Psychiatrist, Psychologist, Psychotherapist, Head of the facility, Coordinator of the facility, Psychiatric Rehabilitation Therapist, ABA Technician, Social Worker, Professional Nurse, Educators, Social Health Worker, Agronomist, Agricultural worker, together with the family and the guest, draws up the Personalized Rehabilitation Therapeutic Project (PTRP) which takes into account the characteristics that emerged from the observation to define the objectives of individual and functional growth, taking into account the sphere of interests and aptitudes.

The Personalized Rehabilitation Therapeutic Project (PTRP), consistent with the Individual Treatment Plan (PTI), is a dynamic, flexible, individualized (recognizes the uniqueness and subjectivity of each person), personalized (it provides objectives and actions consistent with the resources and with the potential) participated (it enhances the sharing and the protagonism of the people involved).

The Personalized Rehabilitation Therapeutic Project (PTRP) is the tool for "planning autonomy", it is aimed at recovering autonomy in daily life and work activities and at increasing social

	<b>CHARTER OF SERVICES</b> 	<b>MOD 55 E</b>	
		Rev 2 data 07/08/23	Pagina 9 di 13

participation. It must meet the needs of the person with particular emphasis on their expectations and quality of life.

### Activities

The activities represent the concrete tool of the training-enabling-rehabilitative action: they allow to detect the resources present, they allow the learning of new behavioral and relational strategies, they favor experiences within a structured context, they improve the individual resources and the drive towards autonomy.

They are divided into:

#### Internal Activities

The program takes into account individualized operational projects and the more comprehensive project that involves the whole group, also with job placement objectives. Specifically, activities of:

- Enhancement of personal autonomy
- Acquisition and enhancement of domestic autonomy
- Enhancement of communication skills
- Acquisition and enhancement of functional social skills
- Enhancement of expressive skills
- Psychological and psychoeducational monitoring
- Acquisition and enhancement of leisure management skills
- Acquisition and enhancement of work skills

#### External Activities

The structure promotes local activities such as:

- Education on the use of structures and services in the area
- Participation in socialized and cultural activities (Cinema, exhibitions, theatre, festivals...)
- Participation in motor activities
- Participation in recreational activities (trips, excursions, summer and/or winter stays)

#### Monitoring and Verification

The structure promotes local activities such as:

- Education on the use of structures and services in the area
- Participation in socialized and cultural activities (Cinema, exhibitions, theatre, festivals...)
- Participation in motor activities
- Participation in recreational activities (trips, excursions, summer and/or winter stays)

	<b>CHARTER OF SERVICES</b> 	<b>MOD 55 E</b>	
		Rev 2 data 07/08/23	Pagina 10 di 13

It is essential that monitoring includes a constant review of the PTRP by acquiring information to reflect on what is being achieved and study changes and adaptations of activities; a re-planning considering that the implementation phase of a project always implies deviations from what was initially foreseen; a reporting system through which to provide the various actors with updated reports on the progress of the PTRP.

The project implementation phase therefore represents a virtuous learning process through which the team learns from what it is doing and adapts it to the difficulties and/or needs that arise during the work.

In the implementation phase, the verification has the purpose of establishing whether a project is achieving the objectives that had been established, supporting the decision-making processes relating to the actions to be undertaken in the subsequent development period.

Project monitoring is carried out annually, together with the Representatives of the Specialist Services, to evaluate and acquire useful elements to overcome any difficulties encountered and improve its quality.

### **Family involvement**

Families play a fundamental role in the life path of the person with autism spectrum disorder as they have to deal in the long run with a series of complex and difficult to manage relational, behavioral and communicative problems, which require the activation of a network of supports, formal and informal, strong, competent and cohesive. They therefore constitute an indispensable point of reference in defining the objectives and in sharing the Personalized Therapeutic Rehabilitation Project (PTRP), in the elaboration of which they are involved. Particular care is taken in communication and in the construction of an educational alliance, in order to lighten and dissolve the emotional tensions connected to the problem of the young person with ASD, to favor new ways of relating and communicating and to make them participants and protagonists of the course progress.

Among the ways of relating and communicating with the family, systematic individual meetings and, as needed, can be contemplated for continuous monitoring of the structured program for the person accepted into the project; periodic meetings to exchange information; informal moments, phone calls to welcome proposals and needs; moments of assembly to share knowledge, events and festivities.

### **Resignation**

The young person's discharge can take place following: • end of the rehabilitation process for the achievement of the objectives set by the PTP (return to the family, housing autonomy, possible employment...) • voluntary discharge requested by the young person or by the family; • transfer

	<b>CHARTER OF SERVICES</b> 	<b>MOD 55 E</b>	
		Rev 2 data 07/08/23	Pagina 11 di 13

of the young person to another structure • due to incompatibility with the environment of the structure. In any case, the procedures for discharge are always agreed with the Specialist Service and with the active involvement of the family. At the end of the intensive rehabilitation process, a path aimed at the good management of the discharge is activated.

### **Clinical risk management**

Clinical risk management is a process that aims at continuous improvement of clinical practice through organizational methods capable of identifying and controlling risks, minimizing the occurrence of errors and guaranteeing the safety of guests. The clinical risk management process must be based not on the search for blame, but on the opportunity to learn from mistakes. From an organizational point of view, a Risk Management Representative is used, a "Company Working Group" for clinical risk management.

### **Professional roles**

The team of the structure sees the presence of multidisciplinary skills both in the medical-psychological-educational area and in the technical-agronomic area, precisely to guarantee the full support of the activities, the involvement of young people and the planning of actions consistent with the Individual treatment plan (PTI): Medical Director, Psychiatrist, Psychologist, Psychotherapist, Facility Manager, Facility Coordinator, Psychiatric Rehabilitation Therapist, ABA Technician, Social Worker, Professional Nurse, Educators, Social and Healthcare Worker, Agronomist, Agricultural Worker.

Internal verification, updating and permanent supervision activities are planned (the first is monthly, the second fortnightly). A staff training-updating plan is envisaged, also in agreement with the Specialist Services, carried out by the "ACTL Social Cooperative Training Agency", or through the training agencies of which the cooperative itself is a member. Staff also participate in local, regional and national training events and seminars. Thanks to training and supervision, the operators interact by developing satisfaction, cohesion, well-being, in comparison, they are open to change and they themselves become producers of changes and transformations.

### **Social Health network**

A sharing and planning integration between the ACTL Social Cooperative, the Terre Umbre Agricultural Social Cooperative, the DSM, and the Child Neuropsychiatry Service, AUSL Umbria n. 2, Municipality of Terni and the Municipalities of Valnerina. Specific and continuous collaborations on specific activities may also be activated with other private social entities such as Type A and B social cooperatives, associations, social and agricultural enterprises. A specific collaboration is envisaged with the Universities of Tuscia and Perugia – Faculty of Agriculture.

	<b>CHARTER OF SERVICES</b> 	<b>MOD 55 E</b>	
		Rev 2 data 07/08/23	Pagina 12 di 13

### Relations with the territory

With a view to an effective integration policy, the territory becomes the privileged interlocutor in the promotion of any initiative useful for building a support network for the Project. In particular, the support network favors and maintains relations with voluntary associations, intervenes in the organization of seminars, conferences and events, collaborates with the Services and Territorial Companies in the elaboration of any projects for entering the world of work and in sporting, recreational and cultural activities.

### Personal data processing

The personal and sensitive data concerning the persons entered are subject to treatment in full compliance with the Legislative Decree 06.30.2003 n. 196 (Personal data protection code). In compliance with current legislation, at the time of insertion, the young person and his family are asked to sign the authorization to manage personal data, which authorizes the structure to manage and process data in relation to the therapeutic needs identified by the Medical Director of the structure . The data processing takes place using paper and electronic tools.

Access to and processing of data is permitted to specially appointed operators of the structure, to the Medical Director, to external medical personnel contacted for advice, in compliance with current provisions on the protection of personal data.

The personal and sensitive data concerning the persons entered are subject to treatment in full compliance with the Legislative Decree 06.30.2003 n. 196 (Personal data protection code). In compliance with current legislation, at the time of insertion, the young person and his family are asked to sign the authorization to manage personal data, which authorizes the structure to manage and process data in relation to the therapeutic needs identified by the Medical Director of the structure . The data processing takes place using paper and electronic tools.

Access to and processing of data is permitted to specially appointed operators of the structure, to the Medical Director, to external medical personnel contacted for advice, in compliance with current provisions on the protection of personal data.

Photos and videos are taken only after obtaining written consent. Family members may give such consent for research and/or dissemination purposes.

### Standard of quality

The structure is responsible for determining the quality factors and the operating standards of the same in accordance with what is expressed on the subject by the Umbria Region. The Structure identifies the satisfaction of young people and their families and the satisfaction of operators in carrying out their work as fundamental factors in the quality of the services provided.

The following are identified as service quality indicators:

- The Satisfaction Index for young people and families
- Operator satisfaction index (internal climate).

	<b>CHARTER OF SERVICES</b> 	<b>MOD 55 E</b>	
		Rev 2 data 07/08/23	Pagina 13 di 13

The tools for detecting and verifying the aforementioned indices are:

- The satisfaction questionnaire for parents/family members/guardians prepared on the basis of the requisites required by regional accreditation.
- Internal Climate Questionnaire.

The structure evaluates the results achieved and draws up an annual report which specifies the interventions and actions to be undertaken to improve quality.

### Reports and complaints

The Structure guarantees the function of protection towards the person inserted also through the possibility, for the latter, of making a complaint following a disservice, act or behavior that have denied or limited the usability of the services. The inserted person and the family can leave reports, suggestions or complaints directly to the staff or to the Medical Director or by email to [info@coopterreumbre.it](mailto:info@coopterreumbre.it) or anonymously by post or even by telephone. Complaints in any form presented by users and/or recognized associations or bodies that represent them will be dealt with in the shortest possible time if of an organizational nature or of an immediate solution, otherwise within the time allowed for the analysis of specific cases.

It is the duty of the Medical Director and the Facility Manager to analyse, evaluate and respond to each complaint received and manage the exchange of information between the organization and the complainant.

### Where we are

The structure is located in Strada S. Maria del Caso n°18, Municipality of Terni in the rural context of Valnerina, about 20 min. from the city centre.

### Contacts

Società Cooperativa Sociale Agricola Terre Umbre

Via Aleardi, 4 – Terni

Tel 0744/420106

Mail [info@coopterreumbre.it](mailto:info@coopterreumbre.it)