

“Public Health Policies – Training Romanian staff at Regional level to develop Public Health Policies (PHPRO)”

## PHP ITALY - NATIONAL REPORT

Interviews with:

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Documents reviewed: National Health Plan 2006 - 2008

Level: national

Public Health Policy: National Health Plan

### I. INTRODUCTORY QUESTIONS

University of Perugia was a consultant in health education policies

#### WHAT?

An example of public health policy is the National Health Plan. The National Health Plan is issued every three years. It comprises main areas of interest and action within the health system and presents also models of good practice. It is implemented in the regions by regional health departments in the form of Regional Health Plans.

A part of it is the national policy on health promotion and prevention; it is correlated with other public policies (occupational health, environmental health, health promotion and prevention, healthcare delivery); in this regard it has clear system objectives and health objectives as well as a definition of institutional cooperation.

An important part of the health plan is the basic package (Livelli Essenziali di Assistenza) with provisions regarding: where in the system are delivered which services, introduction of new services, overused services, access to care, managing inequalities, specific health networks (emergency, rare diseases, transfusions and blood banks, transplant, palliative care, pain management, integration between levels of care for continuity and efficiency purposes, integration with social assistance. Several strategic focus areas are mentioned: fostering innovation research and development, empowerment of citizens, human resources in health care sector, promotion of clinical governance as an improvement tool, clinical guidelines, waiting lists, management / administration of health care institutions, public private partnerships, pharmaceutical and prosthesis policies. The health objectives of the national health Plan are: infant and child health, main morbidities (tumors, cardiovascular diseases, diabetes mellitus, respiratory diseases), elderly and the disabled, mental health, addictions, family support, health interventions for

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immigrants and social outcasts, transmittable diseases, food safety and nutrition, veterinary health, occupational health, environment and health

## **II. PROCESSES QUESTIONS**

### **1. The decision to make the new public health policy**

#### **WHO?**

The development of the national Health Plan is decided by the Ministry of Health in Rome.

The stakeholders in the process are the professional associations, scientific associations, Superior Institute of Health (Istituto Superiore de la Sanita) but also the regions which will implement it.

#### **HOW?**

The reasons for deciding to develop the National Health Plan are: the need for a comprehensive approach to tackle the health problems, the development of expensive new health technologies, the need for cooperation in the global context, provisions in the Italian Constitution (rights and health services to be guaranteed all over Italy), epidemiological changes and health needs of the population, the economic and financial context.

The National Health Plan derives from the State - Regions Agreement which establishes main areas of interest and action like: optimizing the demand for primary care clinics, measuring outcomes and promotion of clinical governance for quality, health education, primary prevention, early diagnostic, clinical excellence centers, and clinical research. It has special measures to adjust the health services supply for coping with health needs of the population.

### **2. The development of the public health policy**

#### **WHO?**

The National Health Plan is developed by professionals of public health working in the MoH in Rome. There is a body called “Conferenza Permanente Stato-Regioni” which participates in the elaboration of the NHP

There is a group of experts who works in developing the National Health Plan (conditions they have to comply with)?

#### **HOW?**

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The resources necessary for developing the NHP are provided by the MoH and the Superior Institute of Health (ISS).

The data used to justify actions/decisions consists mainly in epidemiological and demographic data (life expectancy, birth rate, demographic structure of the population, immigration / emigration data, epidemiological data, and morbidity.

What are the instruments used to develop the National Health Plan?

How are people selected to work in developing the National Health Plan (skills and credentials)?

What is the formal process of elaboration of National Health Plan?

### **3. The approval of the public health policy**

#### **WHO?**

The National Health Plan is issued by the Government and approved by the Parliament.

#### **HOW?**

Are there any rules you have to consider while approving a National Health Plan?

### **4. The implementation of the public health policy**

#### **WHO?**

The national Health Plan is implemented by the regions.

The implementation itself is done by the Regional Health Departments

Who controls its implementation?

Who provides resources required for National Health Plan implementation?

#### **HOW?**

The National Health Plan is mandatory (principles, methodology, basic package) but regions can augment it if they have the necessary supplemental funds.

### **5. The monitoring of the public health policy outcomes / effects**

#### **WHO?**

Who monitors the National Health Plan?

Who works in monitoring the National Health Plan (conditions they have to comply with)?

#### **HOW?**

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For the monitoring of the National Health Plan there are non-specific monitoring mechanisms. The New Health Information System is designed to explore the demand - health needs (health services received by an individual) and the supply - provider activities (health interventions).

The data used for the monitoring the National Health Plan consists of health data and indicators. It is an integrated measurement system based on specific data (indicators), classification and coding of activities, data analysis methodology, systematic evaluation of results, continuous enhancement of the database, and improvement of the analysis methodology.

How are people selected to work in monitoring the National Health Plan (skills and credentials)?

Central monitoring of basic health services is the principle on which monitoring is based; a minimum data set, same rules of collecting and validating data, a procedure to make periodic public reports. The aim is to monitor integration between levels of assistance, the quality of care, the appropriateness of care, access and timeliness of care.

### **6. The evaluation of the public health policy**

#### **WHO?**

The National Health Plan is evaluated by the Superior Institute of Health.

#### **HOW?**

What are the instruments and methodology used to evaluate the National Health Plan?

For the evaluation (impact assessment) Indicators focused on outcome not outputs are used. Examples?

How are people selected to work in evaluation of the National Health Plan (skills and credentials)?

Are there any rules you have to consider while evaluating the National Health Plan?

The evaluation becomes public by periodic reports.

### **III. FINAL QUESTIONS**

The strength of this process relies on the fact that it is based on evidence, it is developed by a group of experts and with stakeholders' involvement.

A weakness of this process is not so strong monitoring; evaluation can also be improved.

A good National Health Plan should not be based on local interests.

A successful agency in charge of National Health Plan should be based on a balance between professional, economic, administrative and lobby interests.