

EDITORIAL

Recovery and resilience plan and health: The Italian experience

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At the end of April 2021, the Italian parliament approved the "The Recovery and Resilience Plan: Next Generation Italia" (in Italian 'Piano Nazionale di Ripresa e Resilienza', PNRR), which foresees reforms and investments that need to be implemented in the period 2021-2025 (1).

Why is this plan important from a public health point of view?

At the international level Italy is recognized as one of the best Countries for ability and quality of healthcare in relationship to the resources invested. However, at the national level there is the need of improving the effectiveness of the health governance system with the aim of developing better quality of care (2). The Covid-19 pandemic has underlined some criticisms of the National health system (NHS) and, in particular, the increasing levels of the regional disparities, the excessive dependence on large hospitals and, on the other hand, a shortage of several key professional figures, among which public health professionals, and of Intensive Care Unit beds. The objective of the PNRR is to address these issues by promoting a more diffused model of care, as well as modernising hospital equipment and implementing the training of more healthcare professionals.

Globally speaking, Italy is prepared to use financing capacity the full of NextGenerationEU, and even more: the plan accounts for a total of €235 billion, that represents the largest Recovery and Resilience Plan in Europe. Concerning the 6th mission, "Health", more than \in 20 billion have been allocated for strengthening the healthcare system, with actions on two different sides, i.e., the development of a local network more close and people patients and to modernisation of the NHS's technological equipment. Regarding the first component, the so called "Proximity Assistance and Telemedicine", with a budget of almost $\in 8$ billion, the objective is to strengthen and

reorient the NHS towards a model centred on local areas and social and healthcare networks. This will be important to surmount the fragmentation of the different regional healthcare systems and ensure the real implementation of the Essential Levels of Assistance, and to strengthen prevention and local assistance with the mission of increasing the integration the main stakeholders in healthcare, such as hospitals, local healthcare and social services. Moreover, the first component has also the objective to develop a healthcare model in connection with environmental safety, for contributing to the mitigation of the impact of polluting factors.

In relation with the second component, the so called "Healthcare Innovation, Research and Digitisation", which accounts for almost \in 12 billion, it has the objective of disseminating telemedicine tools and activities, as well as of strengthening the healthcare system's information and digital tools. So, the modernisation of equipment and the creation of safe, sustainable, cutting-edge hospitals are crucial elements to take into account.

The main actions to be developed will be concerning (1):

- Almost 1300 community homes and 400 community hospitals for proximity assistance;

- Home care for 10% of people aged 65 or more;

- More than 600 new local operational Centers for remote assistance;

- More than 3000 new large pieces of equipment for diagnostic and care.

On 22-6-2021 the European Commission endorses Italy's recovery and resilience plan. Looking at the explanation of the endorsement of the Commission, one element needs to be recognized and is that related to effectively contribute to the digital transition of the health sector. According to the plan, the effective implementation of these measures will be important to build future-proof digital infrastructure, to reinforce and to make the



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health sector more efficient, resilient and citizens/patients. close to The full implementation of the plan will be a crucial challenge for modernising the country and for letting the NHS more efficient and equitable. Covid-19 has caused a massive disruption to health services all over the world, and we need to consider long term solutions, including the reduction of the waiting lists, the increasing number of general practitioners and community nurses, a plan for recruiting healthcare professionals in the NHS (4), with a vision that only а Public health and epidemiological approach can assure (5). With the Recovery Plan, the European Union has changed its scope and is looking at the implementation of long-term tools for action. This new approach can be considered a great progress, that witnesses the Union's concrete usefulness to its citizens and the confirmation of the role of Europe as a key actor at the international level (6).

References

1. Ministry of Economy and Finance. The National Recovery and Resilience Plan (NRRP). Available from:

https://www.mef.gov.it/en/focus/T he-National-Recovery-and-Resilience-Plan-NRRP/ (accessed: June 15, 2021).

- La Torre G, Federici A. How to not detonate the bomb: the case of the Italian National Health Service. Public Health 2017;153:178-80.
- European Commission. European Commission endorses Italy's €191.5 billion recovery and resilience plan. Available from: https://ec.europa.eu/commission/pr esscorner/detail/en/qanda_21_3128 (accessed: June 15, 2021).
- Murray R. The NHS needs a comprehensive plan for recovery. BMJ 2021;373:n1555.
- 5. Maffei CM. Epidemiology in the Italian Recovery and Resilience Plan: that desire for hub. Epidemiol Prev 2021;45:142-3.
- Vieilledent C, Drevet JF. The European economic recovery plan, a historic breakthrough: Sustainability without funding is unsustainable. Futur Anal Prospect 2021;441:85-94.

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