



**HEALTH SYSTEMS
FOR THE FUTURE**

Improving the governance of the health system: the example of Veneto Region

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European Parliament, Brussels



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Health and Social Care Area, Veneto Region



	Veneto	Italia
Population	4.9 million	59.8 million
GDP	30,500 euro	26,700 euro
Life expectancy at birth	M: 80.7 - F: 85.4	M 80.1 - F: 84.7
Unemployment	7.1%	12.1%
% < 14 years	13.8%	13.7%
% > 65 years	22%	22%
Net migration	-0.3	+0.4
Average age at childbirth	31.9	31.6
Old age ratio	159.4	157.7
Healthcare costs pro capita	1 794 euro	1 849 euro

VENETO	
Chronic Disability	65% of > 65 years
Childbirth	25% of >75 years
Heart failure	37.000
Diabetes	1.5%
Cancer mortality	5.4%
	30,9% (-0.4% in 3 years)



STRATEGIES, TOOLS, PRINCIPAL RESULTS



Long-term planning policies

**REGIONAL
HEALTHCARE
PLAN**

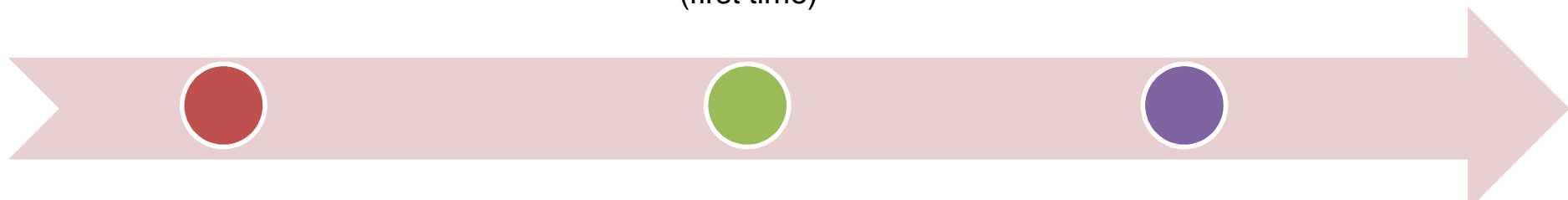
(2012)

**HOSPITAL
AND TERRITORIAL
FORMS**

(2013)

(first time)

**OBJECTIVES
OF GENERAL
DIRECTORS**



REGIONE DEL VENETO			
ALLEGATO C - DGR n. 498 del 29/06/2013			
Azienda sanitaria	RS - Refetto	Punti letto	Scienze
Scienze Mediche			
Punti letto			
1 - Radiologia		12	1
2 - Radiodiagnostica		1	1
3 - Radioterapia		22	1
4 - Radiologia interventiva		1	1
5 - Radiologia nucleare		1	1
6 - Radiologia pediatrica		1	1
7 - Radiologia oncologica		1	1
8 - Radiologia cardiologica		1	1
9 - Radiologia vascolare		1	1
10 - Radiologia dermatologica		1	1
11 - Radiologia ginecologica		1	1
12 - Radiologia pediatrica		1	1
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15 - Radiologia oftalmologica		1	1
16 - Radiologia otorinolaringoiatrica		1	1
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STARTING PARAMETERS

Hospitalization	135 /1000	Hospitalization rate and compliance with national "hospital standards"
Hospital beds	3,5 /1000	
Ambulatory Performance	4 /1000	Outpatient service use rate (excluding laboratory)
Personnel	limit	Economic limit for single organization in comparison with the national limit
	MCT	Minimum Care Time
Pharmaceutical	114 pro capita	Agreed pharmaceutical cost
	Limit	Economic limit for single organization on pharmaceuticals and devices

Governance of the personnel Regional analysis and monitoring

DEFINITION

DGR N. 610 OF THE 29TH OF APRIL 2014

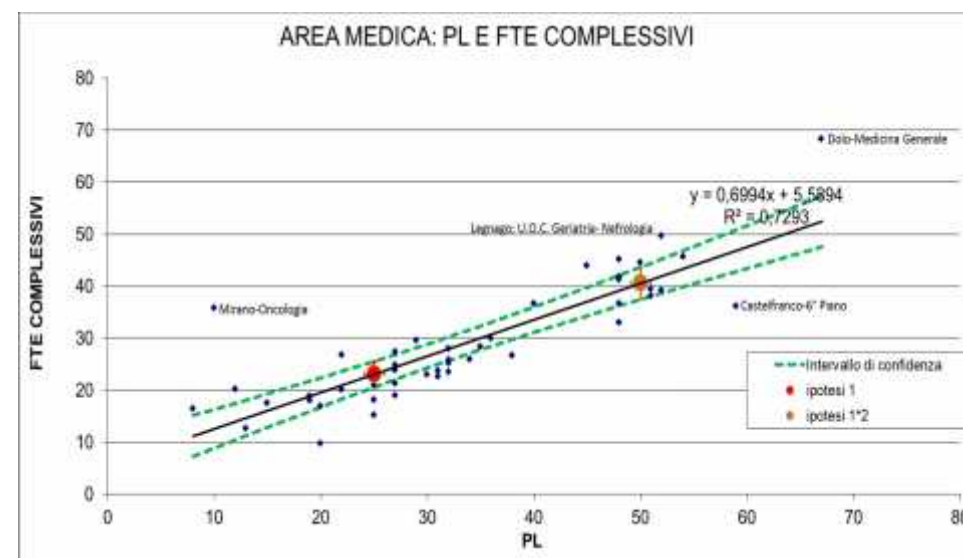
Tabella 2 Valori minimi di riferimento per il personale di assistenza del comparto dedicato alle aree di urgenza ospedaliera

Area Omogenea	Valore di Riferimento Regionale Espresso in TEMA
MEDICINA INTERNA	190
MEDICINA SPECIALISTICA	195
CHIRURGIA GENERALE	190
CHIRURGIA SPECIALISTICA	195
OSTETRICIA E GINECOLOGIA	190
CRITICA	700
PEDIATRICA	700
ASSISTENZA NEONATALE	350
RIABILITAZIONE E LUNGODEGENZA	175
MALATTIE INFETTIVE	250

I valori minimi relativi alle aree omogenee di Medicina Interna, Chirurgia Generale e Ostetricia e Ginecologia potranno essere elevati a 195, per motivate situazioni logistiche o di carico assistenziale.

MONITORING OF REGION

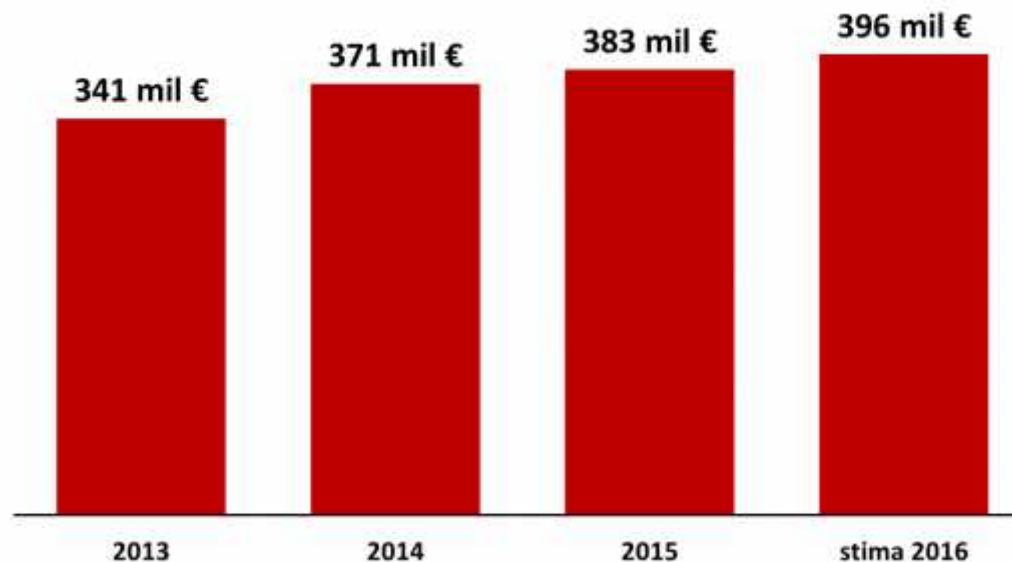
Area omogenea	Dal	Al	Presenza media	Totale Ore	Numero mesi	TEMA Min. giornaliere/Assistente	Valore di riferimento	Differenza
001 - MEDICINA INTERNA	01/2014	06/2014	153,33	55.458,75	3	234,17	190,00	44,17
002 - MEDICINA SPECIALISTICA	01/2014	06/2014	109,10	30.257,5	3	194,46	195,00	-0,54
003 - CHIRURGIA GENERALE	01/2014	06/2014	127,66	46.370,67	3	244,66	190,00	54,66
004 - CHIRURGIA SPECIALISTICA	01/2014	06/2014	59,74	22.425,94	3	254,77	195,00	59,77
005 - OSTETRICIA E GINECOLOGIA	01/2014	06/2014	42,66	8.383,38	3	141,01	190,00	-58,99
006 - CRITICA	01/2014	06/2014	50,56	41.212,72	3	540,56	700,00	-159,43
008 - PEDIATRICA	01/2014	06/2014	79,47	20.100,66	3	453,64	700,00	-253,64
011 - RIABILITAZIONE E LUNGODEGENZA	01/2014	06/2014	39,06	22.585,78	3	360,06	175,00	211,06
012 - MALATTIE INFETTIVE	01/2014	06/2014	75,47	7.763,68	3	250,22	230,00	20,22





Pharmaceutical costs

Hospital costs



Agreed pharmaceutical costs





THE NEW EXECUTIVE POLICIES FOR GOVERNANCE OF THE SYSTEM



Local Healthcare Units



1979 (Regional Law 25 October 1979, n. 78)

31 LHU

IN IMPLEMENTATION OF **NATIONAL** PROVISION
LN 833/1978

1994 (Regional Law 14 September 1994, n. 56)

21 LHU

IMPLEMENTATION OF **NATIONAL** PROVISION
D.LGS 502/1992

2017: 9 LHU



New Districts

DISTRICTS
26

DISTRICTS
2

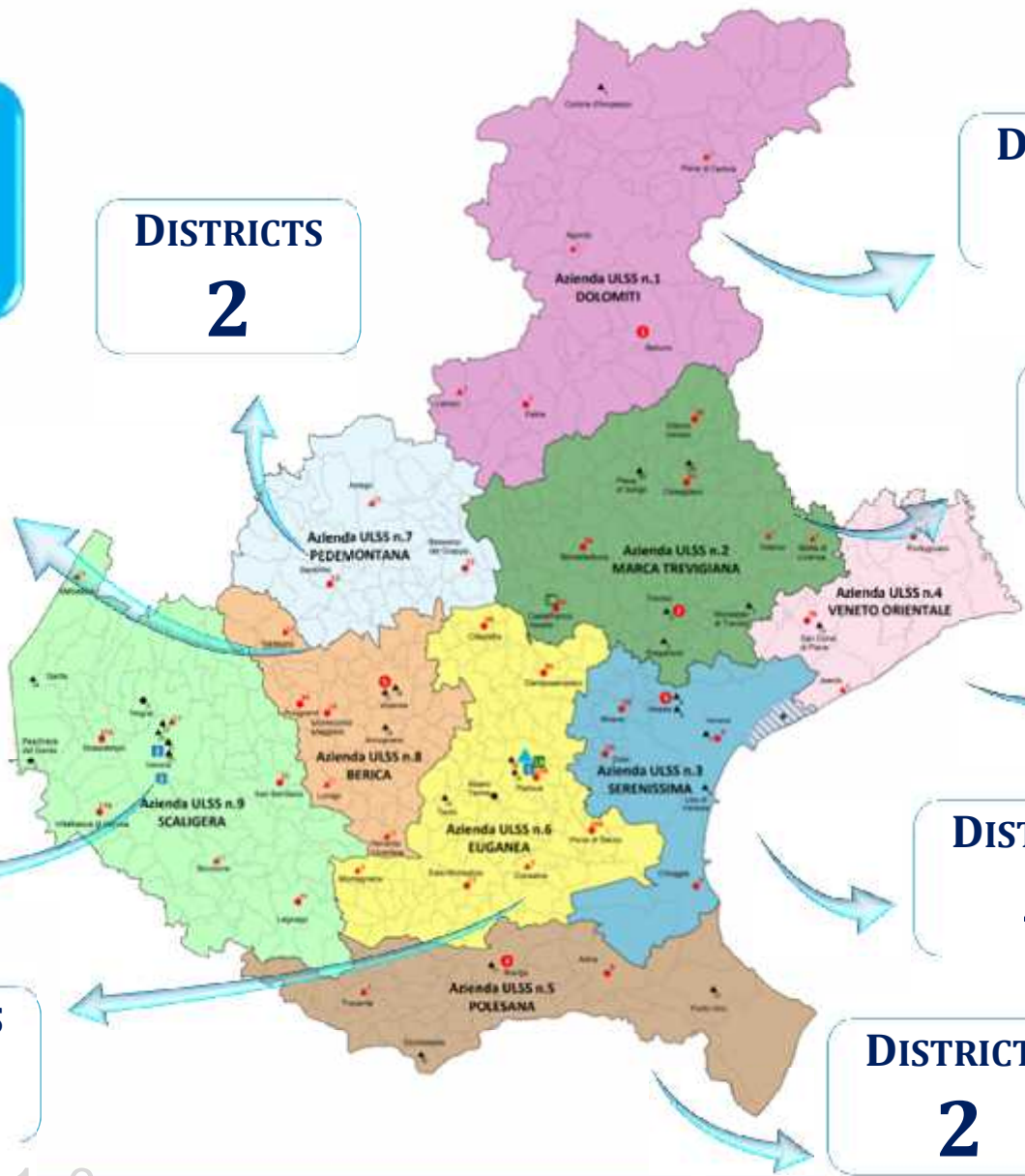
DISTRICTS
2

DISTRICTS
2

DISTRICTS
4

DISTRICTS
4

DISTRICTS
1





PLANNING



AZIENDA
Z E R O

MANAGEMENT- SUPERINTENDENCE



PROVISION OF
SERVICES



PLANNING (ex ante)



REGIONAL COUNCIL
(Regional Laws...)



REGIONAL ASSEMBLY
(Resolution of the Assembly...)



HEALTH AND SOCIAL AREA
(Criteria...)

STRATEGIC PLANNING:

- ✓ REGIONAL SOCIAL-HEALTHCARE PLAN
- ✓ RESOURCE ALLOCATION AND HEALTHCARE BALANCE
- ✓ STRATEGIES OF IMPLEMENTATION AND ORGANIZATION



Management-SUPERINTENDENCE (EX POST)



AZIENDA ZERO

(Decreets-resolutions of the azienda zero)

- M**ANAGEMENT OF TECHNICAL-ADMINISTRATIVE FUNCTIONS
- M**ANAGEMENT OF CENTRALISED HEALTHCARE
- M**ANAGEMENT OF INDICATIONS IN THE ECONOMIC-FINANCIAL AREA
- ...



PROVISION OF SERVICES

2 HOSPITAL ORGANIZATIONS AND 1 ONCOLOGY INSTITUTE

9 LOCAL HEALTHCARE AGENCIES & TREATMENT SITES

- Hospitals
 - Hub
 - Hospital unit
 - Network node
 - Integration of the network

- Districts

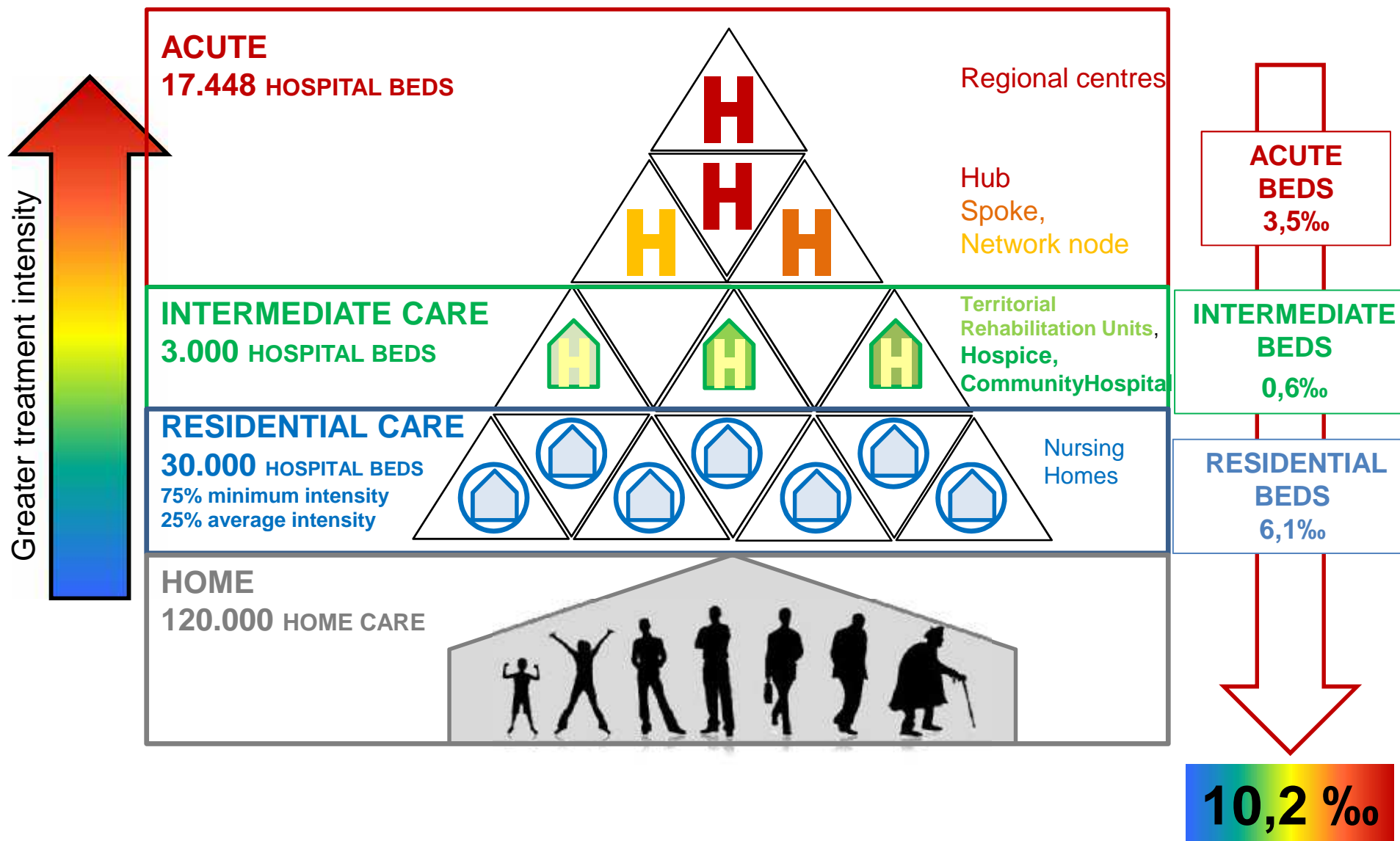
- Integrated Territories and Medicine



ORGANIZATIONAL MODELS



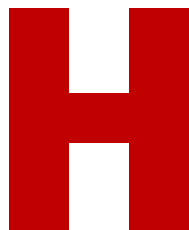
The re-organization does not modify the model of treatment centres





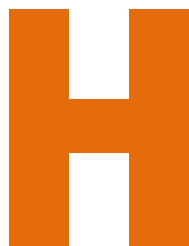
NETWORK HOSPITAL

HUB



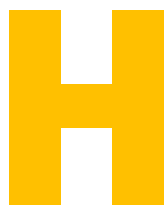
- 2 REGIONAL HUB
- 5 PROVINCE HUB
- 1 REGIONAL CANCER CENTER

SPOKE

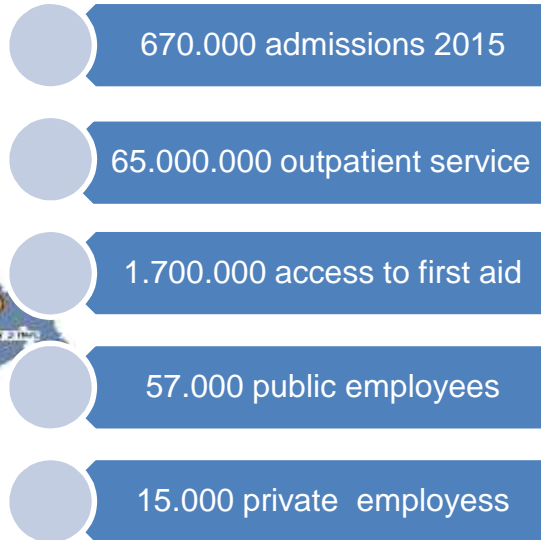
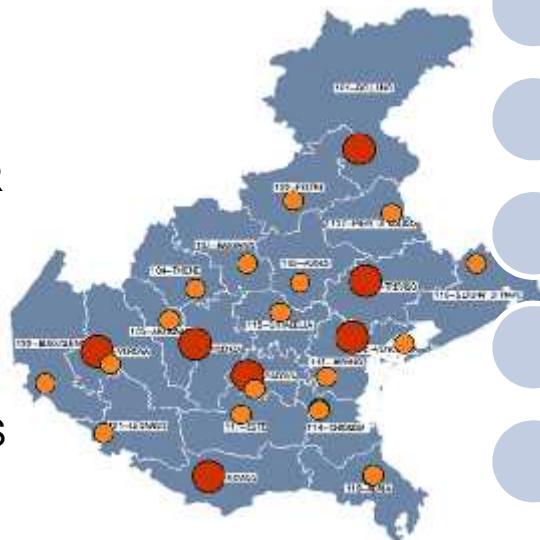


- 17 SPOKE PUBLIC HOSPITALS
- 3 SPOKE PRIVATE HOSPITALS

NODE NETWORK



- 17 NODE NETWORK PUBLIC HOSPITALS
- 23 NODE NETWORK PRIVATE HOSPITALS

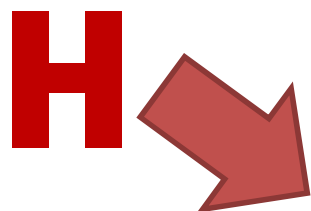


68 structures

- 42 PUBLIC 14.576 beds (84%) + 320 beds for extra region patients
- 26 PRIVATE 2.872 beds (16%) + 467 beds for extra region patients



Intermediate recovery structures



CARE SERVICES NEAREST TO HOME

Hospice



Community Hospital



RTU

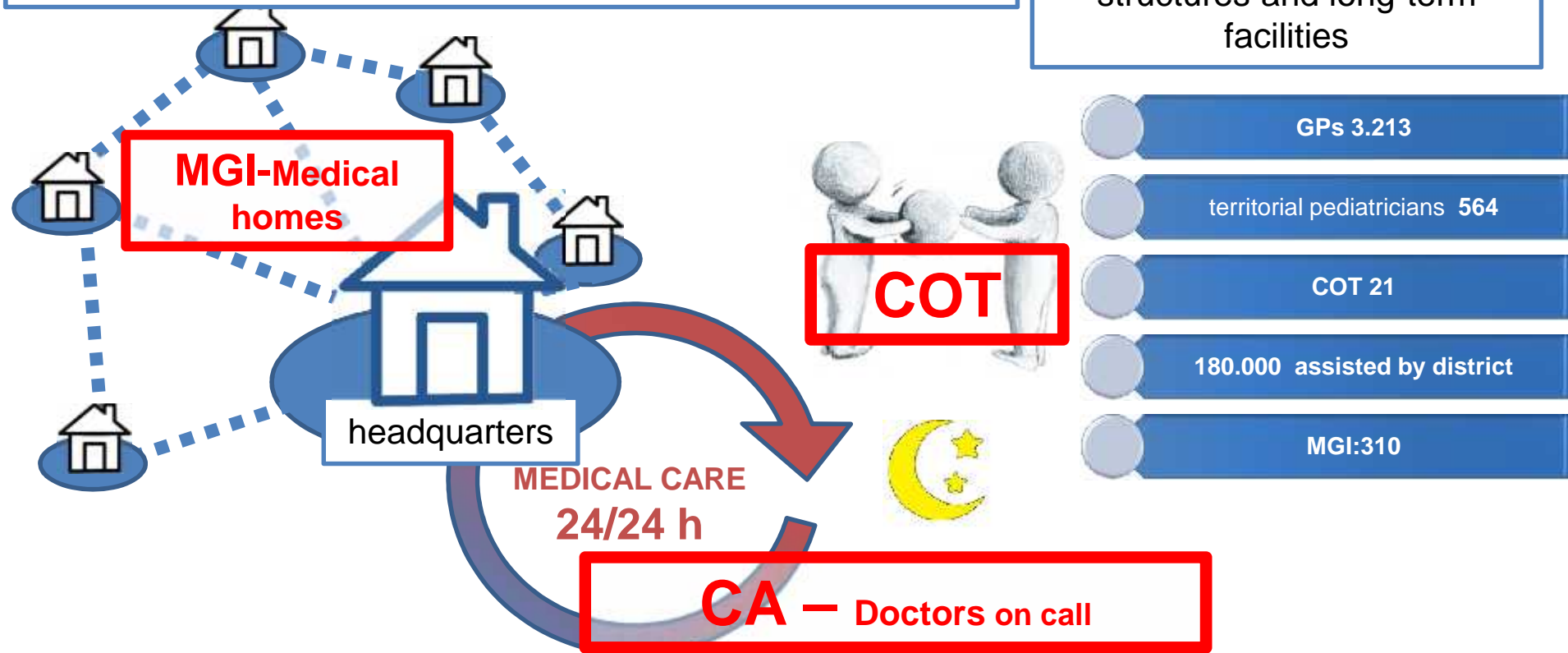




Territorial services

MGI: «MEDICINE DI GRUPPO INTEGRATE» one for 15.000 people assisted.
 Multiprofessional team of general practitioners, medical specialists, nurses, related to specialist and guaranteed a 12 hour opening time

COT “CENTRALE OPERATIVA TERRITORIALE”
 coordinate and monitor the transitions between MGI and intermediate hospital structures and long-term facilities



CA “Continuità Assistenziale” Out-of-hours primary care service.
On call medical doctors providing medical advice and home visits when needed. A free service operating at night and during the weekend



THANK YOU

